# THE LANCET Infectious Diseases

# Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: GBD Tuberculosis Collaborators. The global burden of tuberculosis: results from the Global Burden of Disease Study 2015. *Lancet Infect Dis* 2017; published online Dec 6. http://dx.doi.org/10.1016/S1473-3099(17)30703-X.

# The global burden of tuberculosis: results from the Global Burden of Diseases, Injuries, and Risk Factors (GBD) 2015 Study

# Supplementary Appendix

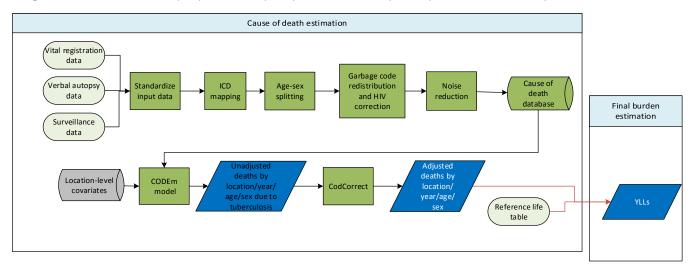
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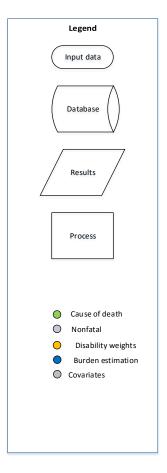
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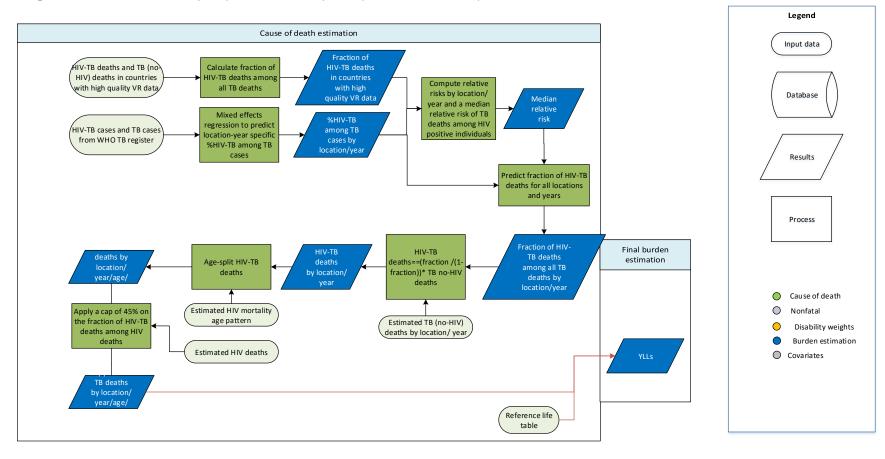
eFigure 1. Tuberculosis (TB) mortality: input data, analytical process, and output



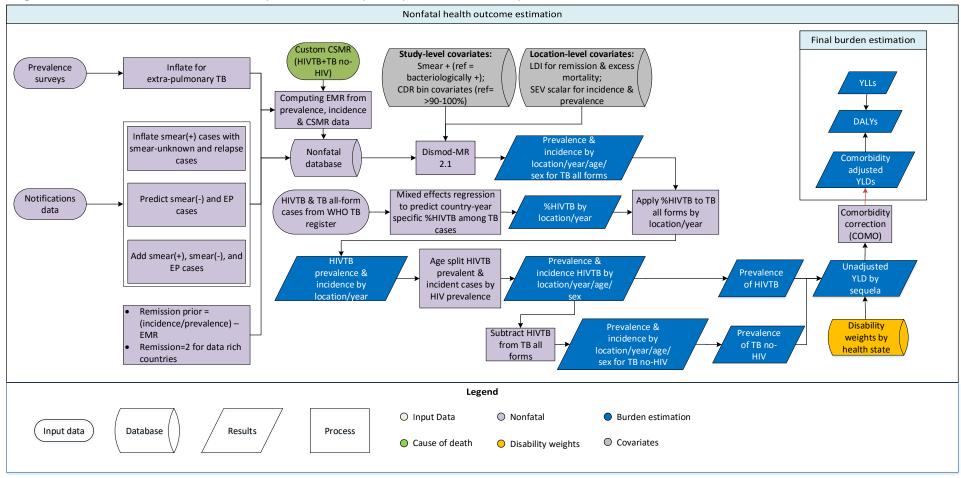


The GBD cause of death database is composed of vital registration data corrected for under-registration and garbage coding, national and subnational verbal autopsy studies corrected for garbage coding, and other sources including surveys and sureillance systems for specific causes such as maternal mortality.

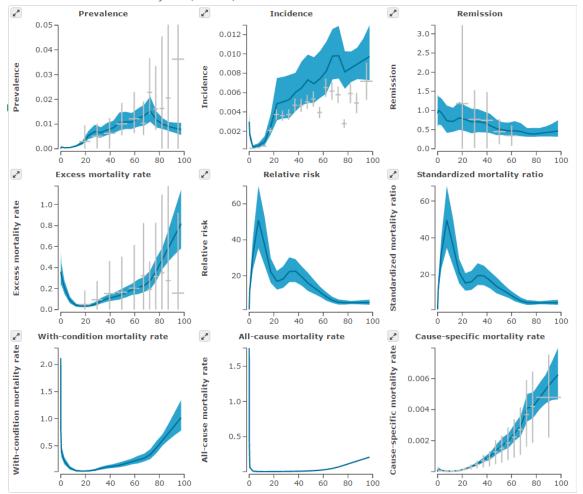
eFigure 2. HIV-TB mortality: input data, analytical process, and output



eFigure 3. Non-fatal TB and HIV-TB: input data, analytical process, and output

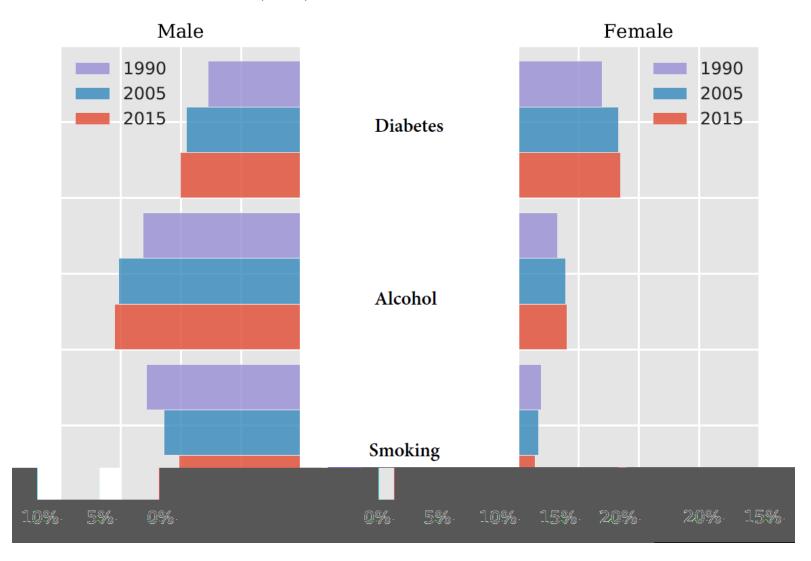


eFigure 4. Bayesian meta-regression estimates for TB prevalence, incidence, remission, excess mortality, and cause-specific mortality for male individuals in Gujarat, rural, 2015



For each observation in grey, the length of the horizontal bar represents the age interval of the observation and the length of the vertical bar represents the uncertainty interval. The blue line represents the mean estimates and the shaded area represents uncertainty intervals.

eFigure 5. Age-standardized population attributable fractions for TB DALYs due to diabetes, alcohol use, and smoking among HIV-negative male and female individuals in 1990, 2005, and 2015



# Appendix Tables

eTable 1a. Beta coefficients and exponentiated values from the model using remission calculated based on incidence and prevalence data

Covariate	Parameter	Beta (95% CI)	Exponentiated beta (95% CI)
Smear positive TB	Prevalence	-0.75	0.47 (0.47 – 0.47)
Sex (male)	Prevalence	0.57	1.77 (1.63 – 1.92)
Sex (male)	Incidence	0.40	1.49 (1.47 – 1.51)
CDR 0 to 10%	Incidence	-2.31	0.099 (0.097 – 0.10)
CDR >10 to 20%	Incidence	-1.62	0.20 (0.19 – 0.20)
CDR >20 to 30%	Incidence	-1.2	0.30 (0.30 – 0.30)
CDR >30 to 40%	Incidence	-0.9	0.41 (0.40 – 0.41)
CDR >40 to 50%	Incidence	-0.7	0.50 (0.49 – 0.50)
CDR >50 to 60%	Incidence	-0.5	0.60 (0.60 – 0.61)
CDR >60 to 70%	Incidence	-0.42	0.66 (0.64 – 0.67)
CDR >70 to 80%	Incidence	-0.28	0.76 (0.73 – 0.79)
CDR >80 to 90%	Incidence	-0.2	0.82 (0.82 – 0.82)
Age-standardized SEV scalar (log-transformed)	Prevalence	0.77	2.16 (2.12 – 2.27)
Age-standardized SEV scalar (log-transformed)	Incidence	0.76	2.13 (2.12 – 2.16)
LDI (log-transformed)	Remission	0.11	1.12 (1.06 – 1.22)
LDI (log-transformed)	Excess mortality	-0.50	0.61 (0.61 – 0.61)

eTable 1b. Beta coefficients and exponentiated values from the model applying the remission assumption for data-rich countries

Covariate	Parameter	Beta (95% CI)	Exponentiated beta (95% CI)
Smear positive TB	Prevalence	-0.75	0.47 (0.47 – 0.47)
Sex (male)	Prevalence	0.57	1.77 (1.62 – 1.96)
Sex (male)	Incidence	0.39	1.48 (1.47 – 1.49)
CDR 0 to 10%	Incidence	-2.30	0.10 (0.10 – 0.10)
CDR >10 to 20%	Incidence	-1.61	0.20 (0.20 – 0.20)
CDR >20 to 30%	Incidence	-1.20	0.30 (0.30 – 0.30)
CDR >30 to 40%	Incidence	-0.90	0.41 (0.41 – 0.41)
CDR >40 to 50%	Incidence	-0.70	0.50 (0.50 – 0.50)
CDR >50 to 60%	Incidence	-0.50	0.61 (0.60 – 0.61)
CDR >60 to 70%	Incidence	-0.43	0.65 (0.64 – 0.66)
CDR >70 to 80%	Incidence	-0.28	0.75 (0.74 – 0.76)
CDR >80 to 90%	Incidence	-0.20	0.82 (0.82 – 0.82)
Age-standardized SEV scalar (log-transformed)	Prevalence	0.77	2.17 (2.12 – 2.30)
Age-standardized SEV scalar (log-transformed)	Incidence	0.75	2.12 (2.12 – 2.12)
LDI (log-transformed)	Remission	0.11	1.12 (1.07 – 1.20)
LDI (log-transformed)	Excess mortality	-0.50	0.61 (0.61 – 0.61)

eTable 2. Relative risks for the associations between smoking, diabetes, and alcohol use, and tuberculosis

Risk – Outcome	Category	Morbidity/ Mortality	Sex	All Ages	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
Smoking																
Tuberculosis	Smoker (5 year lag)	Both	Male			1·588 (1·242 to 2·039)	1.588 (1.242 to 2.039)									
Tuberculosis	Nonsmok er (5 year lag)	Both	Male			1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)
Tuberculosis	Smoker (5 year lag)	Both	Female			1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)	1.599 (1.258 to 2.024)
Tuberculosis	Nonsmok er (5 year lag)	Both	Female			1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)
Diabetes	1															<u> </u>
Tuberculosis	Diabetic	Both	Both		2.730 (1.972 to 3.604)	2.801 (2.053 to 3.672)	2.871 (2.039 to 3.710)	2.798 (1.963 to 3.630)	2.581 (1.906 to 3.275)	2.364 (1.813 to 2.946)	2.147 (1.684 to 2.677)	1.930 (1.485 to 2.441)	1.713 (1.231 to 2.326)	1.598 (1.123 to 2.242)	1.587 (1.182 to 2.116)	1.559 (1.180 to 2.179)
Tuberculosis	Not diabetic	Both	Both		1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)	1.000 (1.000 to 1.000)
Alcohol Use	1															<u> </u>
Tuberculosis	Former	Both	Male	1.210 (1.095 to 1.313)												
Tuberculosis	85 g/day	Both	Male	2.960 (2.302 to 3.835)												

Risk – Outcome	Category	Morbidity/ Mortality	Sex	All Ages	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
Tuberculosis	80 g/day	Both	Male	2.960 (2.302 to 3.835)												
Tuberculosis	70 g/day	Both	Male	2.960 (2.302 to 3.835)												
Tuberculosis	60 g/day	Both	Male	2.960 (2.302 to 3.835)												
Tuberculosis	50 g/day	Both	Male	2.960 (2.302 to 3.835)												
Alcohol Use (c	continued)	1	<u> </u>													
Tuberculosis	40 g/day	Both	Male	2.960 (2.302 to 3.835)												
Tuberculosis	30 g/day	Both	Male	1.000 (1.000 to 1.000)												
Tuberculosis	20 g/day	Both	Male	1.000 (1.000 to 1.000)												
Tuberculosis	10 g/day	Both	Male	1.000 (1.000 to 1.000)												
Tuberculosis	0 g/day	Both	Male	1.000 (1.000 to 1.000)												
Tuberculosis	Former	Both	Female	1.440 (1.280 to 1.608)												

Risk – Outcome	Category	Morbidity/ Mortality	Sex	All Ages	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
Tuberculosis	60 g/day	Both	Female	2.960 (2.253 to 3.851)												
Tuberculosis	50 g/day	Both	Female	2.960 (2.253 to 3.851)												
Tuberculosis	40 g/day	Both	Female	2.960 (2.253 to 3.851)												
Tuberculosis	30 g/day	Both	Female	1.000 (1.000 to 1.000)												
Tuberculosis	20 g/day	Both	Female	1.000 (1.000 to 1.000)												
Tuberculosis	10 g/day	Both	Female	1.000 (1.000 to 1.000)												
Tuberculosis	0 g/day	Both	Female	1.000 (1.000 to 1.000)												

eTable 3. Age-standardized tuberculosis (with and without HIV) incidence, prevalence, and mortality rates and annualized rates of change for both sexes for 21 GBD regions and five SDI categories

01 50111 30.003 101 2		standardized rates in			Annı	ualized rate of chang	e of age-standardize	d rate		
	(per 100,000 popu	ılation) with 95% un	certainty intervals			(%) with 95% un	certainty intervals			
					1990–2005		2005–2015			
	Incidence	Prevalence	Mortality	Incidence	Prevalence	Mortality	Incidence	Prevalence	Mortality	
Global	137.5	137.0	18.9	-0.5	-0.3	-1.8	-2.0	-1.2	-4.6	
	(124.2-150.7)	(126.2-148.1)	(15.4-22.4)	(-0.7 to -0.3)	(-0.4 to -0.1)	(-2.4 to -1.4)	(-2.3 to -1.6)	(-1.4 to -0.9)	(-5.4 to -3.9)	
High SDI	29.3	17.0	1.5	-1.1	-0.5	-0.9	-3.1	-3.1	-7.3	
	(27.0-31.5)	(15.8-18.1)	(1.4-1.5)	(-1.5 to -0.7)	(-0.8 to -0.2)	(-1.2 to -0.5)	(-3.6 to -2.6)	(-3.5 to -2.7)	(-8.0 to -6.6)	
High-middle SDI	107.8	100.6	7.8	0.7	0.8	-1.3	-11.7	-10.5	-6.0	
	(96.8-118.9)	(91.9-109.4)	(6.6-9.0)	(0.4 to 1.0)	(0.5 to 1.0)	(-2.1 to -0.7)	(-12.3 to -11.1)	(-11.0 to -10.1)	(-6.6 to -5.2)	
Middle SDI	175.9	196.6	19.4	-1.3	-1.1	-3.5	-2.1	-1.1	-5.3	
	(159.3-192.7)	(181.2-212.2)	(15.3-23.4)	(-1.5 to -1.0)	(-1.3 to -1.0)	(-4.4 to -2.7)	(-3.3 to -0.8)	(-2.2 to -0.1)	(-6.4 to -4.3)	
Low-middle SDI	211.6	208.8	48.5	-1.8	-1.2	-2.6	-2.2	-1.5	-4.4	
	(191.2-231.6)	(189.9-228.2)	(38.4-58.4)	(-2.7 to -0.9)	(-2.1 to -0.3)	(-3.5 to -2.0)	(-3.5 to -0.9)	(-2.8 to -0.4)	(-5.7 to -3.4)	
Low SDI	247.9	215.6	86.6	-4.0	-4.1	-0.1	3.6	3.8	-4.2	
	(229.6-265.9)	(200.9-230.4)	(63.0-109.9)	(-4.2 to -3.8)	(-4.3 to -4.0)	(-1.3 to 1.2)	(3.3 to 3.9)	(3.6 to 4.1)	(-5.9 to -2.5)	
High-income Asia Pacific	31.7	15.4	1.8	-5.1	-5.3	-6.4	-1.4	-1.4	-4.6	
	(29.1-34.3)	(14.0-16.8)	(1.7-1.9)	(-5.5 to -4.8)	(-5.7 to -5.0)	(-6.8 to -6.1)	(-2.0 to -0.8)	(-2.1 to -0.9)	(-5.3 to -4.0)	
Central Asia	98.5	76.2	7.7	0.2	0.7	1.8	-3.4	-2.8	-6.9	
	(90.1-106.8)	(70.0-82.3)	(6.1-9.2)	(-0.1 to 0.5)	(0.5 to 0.9)	(-0.3 to 2.7)	(-4.0 to -2.9)	(-3.3 to -2.3)	(-7.7 to -6.0)	
East Asia	100.5	127.5	3.6	-0.9	-1.1	-6.6	-1.8	-0.4	-7.5	
	(89.2-111.9)	(116.1-138.9)	(2.5-4.8)	(-1.4 to -0.4)	(-1.4 to -0.7)	(-7.8 to -4.4)	(-2.2 to -1.3)	(-0.7 to 0.0)	(-8.7 to -5.8)	
South Asia	212.3	218.9	45.9	-2.4	-1.7	-3.3	-2.8	-1.6	-4.8	
	(187.6-237.6)	(194.8-242.9)	(36.1-55.9)	(-2.6 to -2.1)	(-1.9 to -1.5)	(-4.0 to -2.6)	(-3.2 to -2.2)	(-1.9 to -1.2)	(-6.2 to -3.8)	
Southeast Asia	227.7	250.1	37.5	-2.5	-2.4	-3.7	-1.5	-1.1	-4.5	
	(209.9-246.4)	(233.8-266.1)	(28.8-46.2)	(-2.8 to -2.2)	(-2.6 to -2.2)	(-4.9 to -2.6)	(-1.9 to -1.0)	(-1.4 to -0.8)	(-6.2 to -3.0)	
Australasia	7.7	3.9	0.2	-2.2	-2.2	-5.6	0.2	0.4	-4.0	
	(6.2-9.3)	(3.1-4.7)	(0.2-0.2)	(-3.0 to -1.6)	(-3.0 to -1.6)	(-6.2 to -5.0)	(-0.4 to 1.0)	(-0.3 to 1.1)	(-5.0 to -3.0)	

	41.6	26.3	5.0	-2.0	-2.0	-2.8	-1.6	-1.6	-3.6
Caribbean	(38.5-44.7)	(24.3-28.3)	(3.4-6.7)	(-2.3 to -1.8)	(-2.2 to -1.8)	(-4.2 to -0.9)	(-2.0 to -1.2)	(-2.1 to -1.2)	(-4.9 to -2.3)
	32.5	16.5	1.5	-1.8	-1.7	-3.4	-2.9	-2.7	-6.5
Central Europe	(29.9-35.1)	(15.2-17.9)	(1.3-1.6)	(-2.0 to -1.5)	(-1.9 to -1.5)	(-3.8 to -3.0)	(-3.3 to -2.4)	(-3.1 to -2.3)	(-7.2 to -5.6)
	124.9	67.8	6.6	2.8	3.8	6.0	-3.5	-4.0	-8.3
Eastern Europe	(115.5-134.3)	(63.5-72.0)	(6.1-7.0)	(2.3 to 3.2)	(3.3 to 4.2)	(5.5 to 6.5)	(-4.1 to -2.7)	(-4.5 to -3.4)	(-9.2 to -7.4)
	11.2	5.6	0.5	-5.3	-5.4	-6.5	-1.8	-1.5	-4.9
Western Europe	(9.2-13.1)	(4.6-6.6)	(0.5-0.5)	(-5.7 to -4.9)	(-5.8 to -5.0)	(-6.8 to -6.1)	(-2.4 to -1.3)	(-2.1 to -0.9)	(-5.4 to -4.3)
	79.3	52.5	8.9	-6.7	-6.9	-7.8	-2.4	-2.1	-4.7
Andean Latin America	(70.6-87.8)	(46.8-58.2)	(5.3-12.6)	(-7.0 to -6.3)	(-7.2 to -6.6)	(-9.7 to -2.5)	(-2.9 to -1.7)	(-2.8 to -1.5)	(-5.8 to -3.8)
	29.9	14.3	3.1	-4.2	-4.1	-6.7	-2.5	-2.4	-4.6
Central Latin America	(28.0-31.8)	(13.3-15.3)	(2.9-3.3)	(-4.4 to -4.0)	(-4.3 to -3.9)	(-7.0 to -6.3)	(-2.9 to -2.0)	(-2.8 to -2.0)	(-5.1 to -4.1)
	37.9	20.9	3.0	-2.7	-1.8	-3.1	-1.8	-2.1	-3.2
Southern Latin America	(35.5-40.4)	(19.6-22.2)	(2.9-3.2)	(-3.2 to -2.3)	(-2.1 to -1.4)	(-3.4 to -2.8)	(-2.4 to -1.2)	(-2.6 to -1.6)	(-3.8 to -2.6)
	42.6	30.6	3.9	-0.9	-1.1	-3.4	-1.3	-1.2	-3.8
Tropical Latin America	(38.7-46.6)	(27.5-33.7)	(3.0-4.9)	(-1.4 to -0.5)	(-1.5 to -0.7)	(-4.7 to -2.5)	(-1.7 to -1.0)	(-1.6 to -0.8)	(-4.8 to -2.5)
	38.5	27.6	5.1	-2.8	-3.0	-3.3	-0.9	-0.8	-3.5
North Africa and Middle East	(34.1-42.8)	(24.5-30.5)	(3.8-6.5)	(-2.9 to -2.7)	(-3.1 to -2.8)	(-4.3 to -2.0)	(-1.3 to -0.6)	(-1.2 to -0.4)	(-4.5 to -2.4)
	4.1	2.2	0.2	-6.1	-6.0	-7.9	-2.4	-2.3	-3.8
High-income North America	(3.5-4.8)	(1.8-2.5)	(0.2-0.2)	(-6.8 to -5.3)	(-6.8 to -5.3)	(-8.2 to -7.6)	(-2.9 to -2.0)	(-2.9 to -1.8)	(-4.3 to -3.3)
	74.4	72.8	12.1	-0.7	-0.9	-2.1	-0.1	0.2	-3.4
Oceania	(67.1-81.8)	(66.4-79.3)	(7.3-16.9)	(-1.0 to -0.5)	(-1.1 to -0.7)	(-3.8 to -0.3)	(-0.7 to 0.6)	(-0.3 to 0.8)	(-5.4 to -1.3)
	320.3	263.1	103.5	-0.1	-0.6	0.3	-1.5	-1.4	-3.4
Central Sub-Saharan Africa	(290.7-350.4)	(238.1-287.7)	(30.0-176.1)	(-0.4 to 0.1)	(-0.9 to -0.4)	(-2.8 to 3.5)	(-1.9 to -1.1)	(-1.8 to -1.0)	(-6.9 to -0.5)
	278.5	237.6	79.7	0.8	0.8	0.2	-3.1	-2.9	-5.3
Eastern Sub-Saharan Africa	(259.2-298.0)	(224.2-251.1)	(58.5-100.8)	(0.5 to 1.1)	(0.6 to 1.0)	(-1.3 to 1.3)	(-3.5 to -2.6)	(-3.2 to -2.5)	(-7.5 to -3.2)
	1,506.3	1,330.5	161.1	7.7	7.9	7.3	-3.0	-3.0	-6.3
Southern Sub-Saharan Africa	(1,338.9-1,675.3)	(1,205.9-1,454.2)	(136.0-186.0)	(7.0 to 8.3)	(7.4 to 8.4)	(4.7 to 9.0)	(-3.6 to -2.2)	(-3.5 to -2.5)	(-7.6 to -4.7)
	178.7	164.7	46.2	-0.0	-0.0	-1.2	-1.3	-1.3	-3.6
Western Sub-Saharan Africa	(163.3-194.1)	(151.7-177.8)	(32.1-60.7)	(-0.2 to 0.1)	(-0.2 to 0.1)	(-2.4 to -0.1)	(-1.8 to -0.9)	(-1.7 to -0.9)	(-5.1 to -2.1)

eTable 4. Tuberculosis DALYs (in HIV-negative individuals) attributable to smoking, alcohol use, and diabetes and annualized rate of change (2005–2015) for 21 Global Burden of Disease regions

		Tuberculosis DAL			Annualized rate of change in DALYs attributable to each risk factor (2005–2015) (%) (95% UI)				
	Smo	oking	Alcoh	ol use	Dial	oetes			
	2005	2015	2005	2015	2005	2015	Smoking	Alcohol use	Diabetes
	3,717,425	2,835,620	5,498,279	4,724,643	4,313,417	3,801,840			
	(1,859,497 to	(1,356,976 to	(4,496,910 to	(3,591,134 to	(2,737,185 to	(2,430,311 to	-4.9	-3.5	-3.5
Global	5,830,354)	4,514,191)	6,911,424)	6,197,917)	5,959,512)	5,303,540)	(-5.9 to -4.1)	(-4.5 to -2.6)	(-4.5 to -2.8)
	235,229		478,473	229,078					
	(120,235 to	107,221	(412,409 to	(200,776 to	92,868	53,090	-8.9	-8.4	-7.1
High SDI	345,291)	(54,248 to 159,112)	534,376)	260,389)	(58,242 to 129,693)	(33,637 to 74,193)	(-10.0 to -7.8)	(-9.5 to -7.3)	(-8.2 to -6.0)
	446,252	295,173	855,809	674,642	518,674	408,829			
							-6.4	-4.4	-4.8
High-middle SDI	(221,611 to 695,845)	(144,158 to 467,908)	(680,235 to 998,623)	(519,054 to 807,844)	(322,875 to 710,181)	(258,749 to 563,868)	(-7.2 to -5.6)	(-5.3 to -3.6)	(-5.6 to -4.0)
	1,348,642	1,044,948	1,516,288	1,228,867	1,522,242	1,264,862			
	(555.040	(501.101.	4 450 000	(000.050	(07.5.700	(500 455	-4.9	-4.2	-4.3
Middle SDI	(655,849 to 2,182,381)	(501,434 to 1,718,701)	(1,173,992 to 1,916,166)	(939,850 to 1,596,519)	(976,723 to 2,118,654)	(793,465 to 1,812,499)	(-6.4 to -3.7)	(-5.2 to -3.2)	(-5.6 to -3.3)
	1,425,324	1,122,405	2,014,442	1,910,622	1,802,185	1,637,194			
	(717.004	(500 105	(4.500.400.	(4.000.505.)	4445045	(4.000.500.	-5.0	-3.0	-3.5
Low-middle SDI	(717,234 to 2,265,307)	(509,435 to 1,820,030)	(1,602,490 to 2,683,181)	(1,393,635 to 2,589,363)	(1,147,045 to 2,487,516)	(1,029,699 to 2,287,454)	(-7.0 to -3.6)	(-4.7 to -1.6)	(-5.0 to -2.4)
	259,913	264,117	631,630	679,886	375,281	435,670			
	(112,831 to	(112,678 to	(456,178 to	(426,150 to	(216,434 to	(253,139 to	-3.1	-2.5	-1.7
Low SDI	443,984)	464,499)	867,595)	982,554)	563,709)	686,398)	(-5.7 to -0.6)	(-5.4 to 0.2)	(-3.9 to 0.5)
TTi-L in A .:	21,717	11,596	19,959	12,797	12,820	9,231	-7.9	-5.7	-5.2
High-income Asia Pacific	(11,354 to 32,417)	(5,777 to 17,571)	(15,951 to 23,951)	(9,852 to 15,892)	(7,710 to 18,687)	(5,503 to 13,802)	(-8.8 to -7.0)	(-7.1 to -4.4)	(-6.3 to -4.2)
	47,009	29,553	89,928	57,119	25,944	19,590	-6.6	-6.6	-5.2
Central Asia	(22,891 to 72,448)	(13,927 to 46,041)	(70,518 to 102,825)	(40,268 to 69,705)	(15,820 to 36,884)	(11,967 to 27,857)	(-7.7 to -5.3)	(-8.2 to -5.3)	(-6.2 to -4.3)

	398,336	246,761	461,623	346,527	280,358	173,934			
East Asia	(193,416 to 628,847)	(113,953 to 421,149)	(363,928 to 623,997)	(275,076 to 498,612)	(174,422 to 397,806)	(103,303 to 264,753)	-7.0 (-8.3 to -5.5)	-5.0 (-6.3 to -3.5)	-7.2 (-8.4 to -5.7)
	1,514,450	1,160,246	2,409,374	2,189,746	2,309,423	1,948,027		2.4	4.2
South Asia	(715,187 to 2,450,924)	(516,409 to 1,891,349)	(1,905,273 to 3,124,929)	(1,590,518 to 2,930,183)	(1,472,900 to 3,173,825)	(1,227,955 to 2,740,549)	-5.3 (-7.2 to -4.1)	-3.4 (-5.1 to -2.2)	-4.3 (-5.7 to -3.3)
	154	106	365	316	150	134	-5.6	-3.4	-3.4
Australasia	(91 to 222)	(62 to 153)	(321 to 412)	(272 to 367)	(90 to 219)	(82 to 197)	(-6.5 to -4.8)	(-4.6 to -2.3)	(-4.3 to -2.5)
	3,778	2,589	10,167	9,944	5,214	5,265	-5.6	-1.6	-1.9
Caribbean	(1,858 to 6,205)	(1,240 to 4,550)	(7,632 to 15,544)	(6,969 to 16,295)	(3,064 to 7,773)	(3,011 to 8,272)	(-7.7 to -3.6)	(-3.6 to 0.3)	(-3.5 to -0.4)
	20,423	10,956	38,962	21,834	9,429	5,903	-6.8	-6.2	-5.4
Central Europe	(10,395 to 30,124)	(5,605 to 16,380)	(35,618 to 42,657)	(19,321 to 24,908)	(5,923 to 13,378)	(3,640 to 8,374)	(-7.9 to -5.6)	(-7.5 to -4.9)	(-6.4 to -4.2)
	259,083	111,854	560,269	25,3676	84,784	40,382	-8.6	-8.1	-7.9
Eastern Europe	(131,012 to 379,729)	(56,663 to 165,666)	(493,752 to 619,994)	(223,963 to 286,759)	(52,955 to 117,650)	(24,716 to 56,545)	(-9.6 to -7.5)	(-9.2 to -7.1)	(-9.2 to -6.6)
	9,438	6,483	26,879	21,310	8,559	7,701	-6.5	-4.6	-3.8
Andean Latin America	(4,683 to 18,106)	(3,140 to 12,526)	(20,967 to 49,033)	(15,576 to 40,461)	(4,979 to 14,188)	(4,324 to 13,684)	(-8.2 to -4.8)	(-6.3 to -3.0)	(-5.0 to -2.7)
	12,844	8,964	34,873	29,103	24,046	21,923	-6.7	-4.7	-4.1
Central Latin America	(6,670 to 19,541)	(4,355 to 14,096)	(31,758 to 38,382)	(24,961 to 33,336)	(15,841 to 32,463)	(14,698 to 29,526)	(-7.5 to -5.8)	(-5.6 to -3.9)	(-4.7 to -3.5)
N. d. 46: 1	44,620	40,525	23,825	21,740	83,790	88,073	-4.3	-3.9	-2.8
North Africa and Middle East	(22,273 to 72,092)	(20,213 to 67,620)	(18,055 to 29,881)	(15,327 to 28,848)	(55,000 to 118,162)	(57,102 to 123,621)	(-5.8 to -3.0)	(-5.5 to -2.7)	(-4.0 to -1.5)
		1,702							
Ir I · N d	2,397	(982 to	5,096	4,175	3,288	3,080	-5.1	-3.5	-2.7
High-income North America	(1,359 to 3,463)	2,476)	(4,580 to 5,638)	(3,465 to 4,849)	(2,117 to 4,561)	(1,961 to 4,261)	(-5.6 to -4.6)	(-4.4 to -2.7)	(-3.2 to -2.1)
	3,222	3,065	2,085	1,982	4,640	4,717	-3.4	-2.9	-2.7
Oceania	(1,589 to 5,487)	(1,474 to 5,551)	(1,173 to 3,383)	(1,097 to 3,554)	(2,690 to 7,087)	(2,734 to 7,538)	(-6.2 to -0.5)	(-6.2 to 0.4)	(-5.0 to -0.3)

0 1 1 01	67,182	75,994	119,952	136,784	121,631	145,264	-2.1	-1.8	-1.3
Central sub-Saharan Africa	(22,151 to 173,456)	(23,151 to 201,732)	(46,335 to 269,913)	(49,827 to 318,598)	(52,369 to 251,237)	(59,588 to 337,605)	(-7.4 to 2.8)	(-6.6 to 2.7)	(-5.8 to 2.4)
			514,484	558,976	206,555	232,864			
Eastern sub-Saharan	175,895	171,999	(381,743 to	(354,320 to	(124,064 to	(129,553 to	-3.6	-2.5	-2.1
Africa	(78,937 to 296,036)	(70,694 to 308,271)	663,083)	796,402)	301,461)	371,948)	(-6.9 to -0.7)	(-5.9 to 0.7)	(-5.3 to 0.8)

Note. Total HIV-negative tuberculosis DALYs in 2005 and 2015 were 49,769,565 (43,196,422 to 60,348,200) and 40,302,237 (34,065,779 to 49,653,867) respectively.

# eTable 5. Mean differences and 95% uncertainty intervals for population attributable fractions of risk factors for global tuberculosis deaths

Risk factor pairs	Mean difference (95% uncertainty interval)
Alcohol and diabetes	0.88 (-3.38 to 5.31)
Alcohol and smoking	3.72 (-0.94 to 8.16)
Diabetes and smoking	2.84 (-2.81 to 8.45)

### eTable 6. List of data-rich locations

Location name	Region name
Australia	Australasia
New Zealand	Australasia
Antigua and Barbuda	Caribbean
Barbados	Caribbean
Bermuda	Caribbean
Cuba	Caribbean
Puerto Rico	Caribbean
Saint Lucia	Caribbean
Saint Vincent and the Grenadines	Caribbean
Trinidad and Tobago	Caribbean
Kazakhstan	Central Asia
Bulgaria	Central Europe
Croatia	Central Europe
Czech Republic	Central Europe
Hungary	Central Europe
Poland	Central Europe
Romania	Central Europe
Slovenia	Central Europe
Aguascalientes	Central Latin America

Location name	Region name
Baja California	Central Latin America
Baja California Sur	Central Latin America
Campeche	Central Latin America
Chiapas	Central Latin America
Chihuahua	Central Latin America
Coahuila	Central Latin America
Colima	Central Latin America
Colombia	Central Latin America
Costa Rica	Central Latin America
Distrito Federal	Central Latin America
Durango	Central Latin America
Guanajuato	Central Latin America
Guatemala	Central Latin America
Guerrero	Central Latin America
Hidalgo	Central Latin America
Jalisco	Central Latin America
Michoacán de Ocampo	Central Latin America
Morelos	Central Latin America
México	Central Latin America
Nayarit	Central Latin America
Nuevo León	Central Latin America
Oaxaca	Central Latin America
Puebla	Central Latin America
Querétaro	Central Latin America
Quintana Roo	Central Latin America
San Luis Potosí	Central Latin America
Sinaloa	Central Latin America
Sonora	Central Latin America
Tabasco	Central Latin America
Tamaulipas	Central Latin America

Location name	Region name
Tlaxcala	Central Latin America
Venezuela	Central Latin America
Veracruz de Ignacio de la Llave	Central Latin America
Yucatán	Central Latin America
Zacatecas	Central Latin America
Estonia	Eastern Europe
Latvia	Eastern Europe
Lithuania	Eastern Europe
Moldova	Eastern Europe
Russia	Eastern Europe
Ukraine	Eastern Europe
Aichi	High-income Asia Pacific
Akita	High-income Asia Pacific
Aomori	High-income Asia Pacific
Chiba	High-income Asia Pacific
Ehime	High-income Asia Pacific
Fukui	High-income Asia Pacific
Fukuoka	High-income Asia Pacific
Fukushima	High-income Asia Pacific
Gifu	High-income Asia Pacific
Gunma	High-income Asia Pacific
Hiroshima	High-income Asia Pacific
Hokkaidō	High-income Asia Pacific
Hyōgo	High-income Asia Pacific
Ibaraki	High-income Asia Pacific
Ishikawa	High-income Asia Pacific
Iwate	High-income Asia Pacific
Kagawa	High-income Asia Pacific
Kagoshima	High-income Asia Pacific
Kanagawa	High-income Asia Pacific

Location name	Region name
Kumamoto	High-income Asia Pacific
Kyōto	High-income Asia Pacific
Kōchi	High-income Asia Pacific
Mie	High-income Asia Pacific
Miyagi	High-income Asia Pacific
Miyazaki	High-income Asia Pacific
Nagano	High-income Asia Pacific
Nagasaki	High-income Asia Pacific
Nara	High-income Asia Pacific
Niigata	High-income Asia Pacific
Okayama	High-income Asia Pacific
Okinawa	High-income Asia Pacific
Saga	High-income Asia Pacific
Saitama	High-income Asia Pacific
Shiga	High-income Asia Pacific
Shimane	High-income Asia Pacific
Shizuoka	High-income Asia Pacific
Singapore	High-income Asia Pacific
South Korea	High-income Asia Pacific
Tochigi	High-income Asia Pacific
Tokushima	High-income Asia Pacific
Tottori	High-income Asia Pacific
Toyama	High-income Asia Pacific
Tōkyō	High-income Asia Pacific
Wakayama	High-income Asia Pacific
Yamagata	High-income Asia Pacific
Yamaguchi	High-income Asia Pacific
Yamanashi	High-income Asia Pacific
Ōita	High-income Asia Pacific
Ōsaka	High-income Asia Pacific

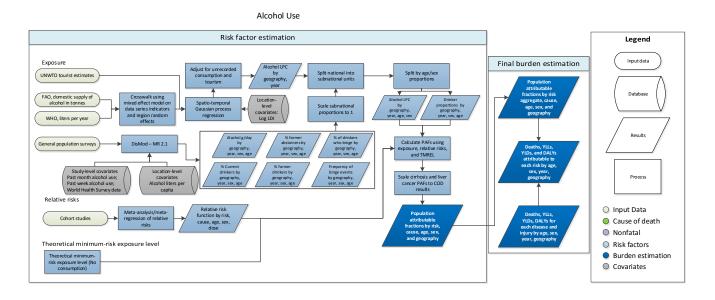
Location name	Region name
Alabama	High-income North America
Alaska	High-income North America
Arizona	High-income North America
Arkansas	High-income North America
California	High-income North America
Canada	High-income North America
Colorado	High-income North America
Connecticut	High-income North America
Delaware	High-income North America
District of Columbia	High-income North America
Florida	High-income North America
Georgia	High-income North America
Hawaii	High-income North America
Idaho	High-income North America
Illinois	High-income North America
Indiana	High-income North America
Iowa	High-income North America
Kansas	High-income North America
Kentucky	High-income North America
Louisiana	High-income North America
Maine	High-income North America
Maryland	High-income North America
Massachusetts	High-income North America
Michigan	High-income North America
Minnesota	High-income North America
Mississippi	High-income North America
Missouri	High-income North America
Montana	High-income North America
Nebraska	High-income North America
Nevada	High-income North America

Location name	Region name
New Hampshire	High-income North America
New Jersey	High-income North America
New Mexico	High-income North America
New York	High-income North America
North Carolina	High-income North America
North Dakota	High-income North America
Ohio	High-income North America
Oklahoma	High-income North America
Oregon	High-income North America
Pennsylvania	High-income North America
Rhode Island	High-income North America
South Carolina	High-income North America
South Dakota	High-income North America
Tennessee	High-income North America
Texas	High-income North America
Utah	High-income North America
Vermont	High-income North America
Virginia	High-income North America
Washington	High-income North America
West Virginia	High-income North America
Wisconsin	High-income North America
Wyoming	High-income North America
Kuwait	North Africa and Middle East
Mauritius	Southeast Asia
Sri Lanka	Southeast Asia
Argentina	Southern Latin America
Chile	Southern Latin America
Uruguay	Southern Latin America
Austria	Western Europe
Belgium	Western Europe

Location name	Region name
Denmark	Western Europe
East Midlands	Western Europe
East of England	Western Europe
Finland	Western Europe
France	Western Europe
Germany	Western Europe
Greater London	Western Europe
Greece	Western Europe
Iceland	Western Europe
Ireland	Western Europe
Israel	Western Europe
Italy	Western Europe
Luxembourg	Western Europe
Malta	Western Europe
Netherlands	Western Europe
North East England	Western Europe
North West England	Western Europe
Northern Ireland	Western Europe
Norway	Western Europe
Portugal	Western Europe
Scotland	Western Europe
South East England	Western Europe
South West England	Western Europe
Spain	Western Europe
Stockholm	Western Europe
Sweden except Stockholm	Western Europe
Switzerland	Western Europe
Wales	Western Europe
West Midlands	Western Europe
Yorkshire and the Humber	Western Europe

# Comparative Risk Assessment Alcohol

#### **Flowchart**



#### **Input Data and Methodological Summary**

#### **Exposure**

#### **Case definition**

The impact of alcohol consumption on morbidity and mortality can be largely described by two separate but related dimensions. The 1<sup>st</sup> dimension is the individual level drinking and consists of four indicators;

1. Current drinkers, defined as the proportion of individuals who have consumed at least one alcoholic beverage (or some approximation) in the last 12 months.

- 2. Former drinkers, defined as the proportion of individuals who have ever consumed an alcoholic beverage, but not in the last 12 months.
- 3. Lifetime abstainers, defined as the proportion of individuals who have never consumed an alcoholic beverage.
- 4. Alcohol consumption (in grams per day), defined as grams of alcohol consumed by current drinkers, per day, over a 12 month period.

The 2<sup>nd</sup> dimension of alcohol consumption relates to the pattern of drinking and consists of two indicators;

- 5. Binge drinkers, defined as the proportion of drinkers who have had a binge event in the past 12 months. A binge event was defined as consuming 60 grams of alcohol (approximately five drinks or more) in a single occasion for males and 48 grams of alcohol in a single occasion for females.
- 6. Binge times, defined as the proportion of drinking events that are binge amongst binge drinkers i.e. the proportion of days that a binger has a binge event.

#### Input data

For GBD 2013, a systematic review of the literature was conducted to capture population survey data on all six alcohol use indicators. In summary, the search was conducted in three stages involving electronic searches of the peer-reviewed literature via PubMed, the grey literature and, expert consultation. Updates to systematic reviews via PubMed are performed on an ongoing schedule across all GBD causes and risk factors, an update for alcohol use will be performed in the next 1-2 iterations. For GBD 2015, stages two and three of the literature review were conducted, prioritizing countries for which subnational estimates were generated. The Global Health Exchange (GHDx), IHME's online database of health-related data, was searched for population survey data containing participant-level information from which we could formulate the required alcohol use indicators. Data-sources were included if they captured a sample representative of the geographic location under study and contained variables that could be used to formulate any of the six alcohol use indicators. Relevant survey variables from each data-source were documented in a Microsoft Excel codebook and extracted using STATA 13.1. A total of 629 potential data-sources were available in GhDx across countries with subnational locations, out of which 127 data-sources (66,108 data-points) were included across all six indicators.

To generate estimates of alcohol consumption in grams per day, data from population surveys were used in combination with estimates of per capita consumption from the Food and Agriculture Organization (FAO) [1] and the Global Information System on Alcohol and Health (GISAH database [2]) Per capita consumption is an aggregate measure of recorded, unrecorded, and tourist per capita consumption of alcohol (UNWTO database [3]) derived from sales, production, and other economic statistics. While population-based surveys provide accurate estimates of the prevalence of lifetime abstainers, former drinkers and current drinkers, they typically underestimate real alcohol consumption levels. As a result, the all-age, both-sex per capita consumption figures from the FAO and GISAH are considered to be a better estimate of overall volume of consumption. Per capita consumption, however, does not provide age- and sex-specific consumption estimates needed to compute alcohol-attributable burden of disease. Therefore, we use the age-sex pattern of consumption among drinkers modeled from the population survey data and the overall volume of consumption from FAO and GISAH to determine the total amount of alcohol consumed by country.

To generate estimates of alcohol consumption in liter per capita, raw inputs were obtained from FAOSTAT [1] and WHO GISAH database [2]. To provide more stable time trends in the model, FAO sales data was transformed to a lagged 5-year average. FAO data was used when WHO data wasn't available. Otherwise, FAO and WHO data was adjusted (crosswalked) by running a mixed effect model on the log average of the data with indicators for the FAO and WHO data series, as well as random effects on super region, region, country, and time. Each data point was adjusted by the predicted betas on super-region and region.

 $Log\ Average\ Data = D + (Super\ Region\ |\ D, Region\ |\ D, Country\ |\ D, Year\ |\ D)$ 

Transformed data = data \*  $e^{\widehat{\beta}_1 + \widehat{\beta}_3}$ 

Where D = Indicator variable for data source

To generate uncertainty, a Lowess model was run on the adjusted data and the standard deviation between the difference of the Lowess smoothed model and the adjusted data points was used for data points missing uncertainty.

Unrecorded consumption was incorporated into the alcohol LPC data using estimates provided by the WHO [4]. WHO estimates were only reported for the years 1990, 2005, and 2010 so for missing years, estimates were interpolated. For years outside this range, unrecorded estimates were carried forward or backwards from the closest year. Unrecorded consumption estimates were reported in liters per capita so estimates were added to adjusted data points to account for unrecorded consumption.

Tourism data was obtained through the UNWTO [4]. A crosswalk was applied across different tourist categories, similar to the one used for FAO and WHO data, to estimate tourist proportions for a given country. Tourism consumption was incorporated after modeling unadjusted alcohol LPC as outlined below.

#### **Modeling strategy**

DisMod-MR 2.1 was used to estimate country-, year-, age- and sex-specific proportions of current drinkers, former drinkers, lifetime abstainers, binge drinkers, and binge times; and alcohol consumption as a continuous variable in grams per day. We have made no substantive changes in the modeling strategy from GBD 2013. We ran single-parameter models for each alcohol use indicator and included a combination of location- and study-level covariates in each model. An alcohol liters per capita location-level covariate was used for all six indicators to assist in the predictive power of the models. Additionally, study-level covariates were used to accommodate for known sources of variability in the raw data. In the current drinkers, former drinkers, binge drinkers and binge times models, we included two covariates which adjusted estimates derived in the past week and past month towards those derived in the past year respectively. Estimates derived in the past year were considered to be the gold standard given the previously outlined definition for each indicator.

In the alcohol consumption model, we included a separate study-level covariate flagging data points derived from The World Health Organization's World Health Surveys (WHS) conducted across multiple countries. There was considerable variability in estimates derived from the WHS which may have been influenced by methodological differences in how alcohol use was captured. This study-level covariate looked for unsystematic bias between data-points and added more

uncertainty onto those from the WHS. If other data-points causing higher or lower modelled output were identified during the modelling process for a given indicator, the plausibility of these data points was assessed and the study methodology reviewed. Data points with methodological limitations, for instance those derived from survey items not entirely representatively of the alcohol use indicators required, with small sample sizes, or derived from samples not entirely representative of the general population were excluded.

A spatial-temporal Gaussian process regression was used to model total alcohol in liters per capita (see appendix, section 2). Parameters and a random effect model for the prior were chosen using out-of-sample cross validation. This produced estimates of alcohol LPC for a complete time series for the years 1980-2015 by country.

Alcohol LPC was adjusted for each country hosting tourists using the following equations:

$$Alcohol\ LPC_H = Unadjusted\ Alcohol\ LPC_H + Alcohol\ LPC_{Consumption\ abroad} - Alcohol\ LPC_{Tourist\ consumption}$$

$$Alcohol\ LPC_{Consumption\ abroad} = \frac{\sum_{V} Proportion\ of\ tourists\ _{H,V}*Unadjusted\ Alcohol\ _{LPC\ _{H}}*}{\frac{Average\ length\ of\ stay\ _{H,V}}{365}*Tourist\ Population\ _{V}}{Population\ _{H}}$$

$$Alcohol\ LPC_{Tourist\ consumption} = \frac{\sum_{V} Proportion\ of\ tourists\ _{V}*Unadjusted\ Alcohol\ _{LPC\ _{V}}* \frac{Average\ length\ of\ stay\ _{V}}{365}* Tourist\ Population\ _{H}}{Population\ _{H}}$$

Where H = Host country, V = Visiting country

Or, in other words, alcohol LPC was adjusted by adding in the per capita rate of consumption abroad and subtracting the per capita rate of tourist consumption domestically.

After adjusting alcohol LPC by tourist consumption and unrecorded consumption for all location/years reported, sex-specific and age-specific estimates were generated by incorporating estimates modeled in Dismod for percentage of current drinkers within a location/year/sex/age, as well as consumption trends modeled in Dismod g/day by location/year/sex/age, using the following equations.

Proportion of total consumption 
$$_{l,y,s,a} = \frac{Alcohol \ g/day \ _{l,y,s,a} * Population \ _{l,y,s,a} * \% \ Current \ drinkers \ _{l,y,s,a}}{\sum_{s,a} Alcohol \ g/day \ _{l,y,s,a} * Population \ _{l,y,s,a} * \% \ Current \ drinkers \ _{l,y,s,a}}$$

$$Alcohol\ LPC_{l,y,s,a} = \frac{\textit{Alcohol\ LPC}_{l,y}*\textit{Population}_{l,y}*\textit{Proportion\ of\ total\ consumption}_{l,y,s,a}}{\textit{Population}_{l,y,s,a}}$$

Where L = location, Y = Year, S = Sex, A = Age

A similar scalar was applied so that total subnational consumption equaled national consumption.

#### Theoretical minimum-risk exposure level

For alcohol use, the theoretical minimum-risk exposure level (TMREL) was assumed to be no alcohol use, i.e. 0 g/day of alcohol consumption. This diverges from the definition of other theoretical minimum-risk exposure level of risks because, for some alcohol-use relative risks, there's a preventative effect for low levels of consumption. However, due to the modeling of alcohol relative risks outlined below, it was found that 0 g/day provided the most consistency between the definition of alcohol-use TMREL and other GBD risk's TMREL. This is an area of improvement for future GBD iterations. Current research suggests that the preventative effect noted in studies may be due to issues in estimating abstainer populations. [5-7] If this is the case, a TMREL of 0 would still be valid.

#### **Relative Risks**

Relative risks were derived for each GBD cause by mapping functions to the dose-response relationships found in meta-analysis. [11-22] Due to data availability, for high levels of consumption, uncertainty in the relative risk functions increases greatly. To minimize the uncertainty of these measures, relative risks were estimated up to the 90<sup>th</sup> percentile of exposures in men (85 g/day) and the 95<sup>th</sup> percentile of exposures in women (60 g/day). For exposures beyond this, the associated relative risk was carried forward from these chosen percentile exposure levels. Though a dose-response relationship is evident at higher levels of exposure, the shape of the relative risk function is highly uncertain for higher levels of exposure both due to a lack of observations at these exposure levels, as well as confounding variables affecting estimation of the relative risk of these populations. Thus, our relative risk estimates are likely an underestimate for the top 10% of male exposures and 5% of female exposures.

#### **Population Attributable Fraction**

For chronic conditions, PAF was defined as

$$PAF(x) = \frac{P_A + P_{F^*} RR_F + \int_0^{150} P(x) * RR_C(x) dx - 1}{P_A + P_{F^*} RR_F + \int_0^{150} P(x) * RR_C(x) dx} \qquad P(x) = P_C * \frac{\Gamma(k, \theta)}{\int_{0.1}^{150} \Gamma(k, \theta)}$$

where:

x = alcohol consumption in g/day

$$k = \frac{\overline{x}^2}{\sigma(\overline{x})^2}$$

P<sub>A</sub> = Prevalence of lifetime abstainers

P<sub>F</sub> = Prevalence of former drinkers

P(x) = Prevalence of alcohol consumption

$$\theta = \frac{\sigma(\overline{x})^2}{\overline{x}^2}$$

RR<sub>F</sub> = Relative risk of former drinkers

 $RR_C(x)$  = Relative risk function for drinkers

A thousand draws were taken of PAFs to generate uncertainty. The gamma distribution was used to estimate individual level variation within drinking populations [8-9]. Binge drinkers were not taken into account for chronic causes since the pattern of drinking has not been found to be an indicator of most outcomes [10].

For non-chronic conditions, such as injuries, binge drinking was accounted for in the model since patterns of drinking is significant.

$$PAF(x) = \frac{P_A + P_F + P_C + P_{C+B} * RR_{C+B}(x) - 1}{P_A + P_F + P_C + P_{C+B} * RR_{C+B}(x)}$$

$$RR_{C+B}(x) = P_D * P_{D+B} * (RR_{crude}(x) - 1) + 1$$

$$RR_{C+B}(x) = P_D * P_{D+B} * (RR_{crude}(x) - 1) + 1$$

where:

 $P_{C+B}$  = Prevalence of current drinkers who binge

P<sub>D</sub> = Proportion of a day that is a binge event

RR<sub>C+B</sub> = Relative risk of current drinkers who binge

 $P_{D+B}$  = Proportion of all days where a binge event

RR<sub>crude</sub> = Relative risk for a given mean level of consumption

occurs

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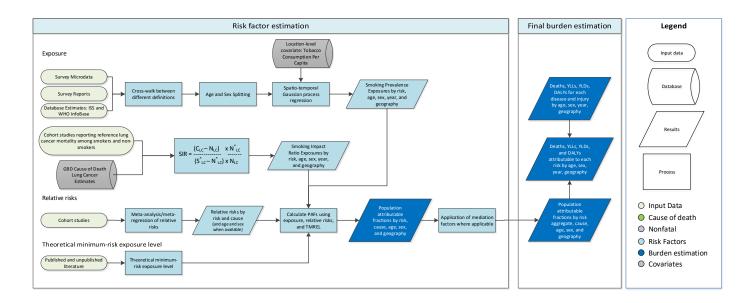
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#### Smoking

#### **Flowchart**

#### Smoking



### **Input Data & Methodological Summary**

#### **Exposure**

#### **Case definition**

We used 5-year lagged smoking prevalence, for modeling burden attributable to smoking for cardiovascular diseases, TB, diabetes, lower respiratory infections, asthma, cataracts, macular degeneration, fractures, rheumatoid arthritis, and peptic ulcer disease. Smoking is a dichotomous exposure defined as current daily use of smoked tobacco.

#### Input data

Consistent with GBD 2013, we used nationally representative survey data to estimate smoking prevalence. Survey and report data identified in the Global Health Data Exchange (GHDx), the WHO InfoBase, and the International Smoking Statistics (ISS) Database.

#### Inclusion Criteria

- Nationally representative
- Report current use of any of the following frequency-type combinations:
  - o Daily use of smoked tobacco
  - o Any use (both daily and occasional) of smoked tobacco
  - Daily use of cigarettes
  - o Any use (both daily and occasional) of cigarettes
  - o Daily use of any tobacco (both smoked and smokeless)
  - o Any use (both daily and occasional) of any tobacco (both smoked and smokeless)
  - o Daily use of any tobacco excluding cigarettes
- Report data within the time period of January 1, 1980 December 31, 2015 for any geography estimated in the GBD framework
- Smoking prevalence reported among individuals ages 10+

#### Global Health Data Exchange (GHDx)

Sources were identified through a systematic search of the GHDx.

- Search Terms (Keywords): Tobacco Use
- Time Period: January 1, 1980 December 31, 2015
- Data Type: Survey OR Report
- Search Date: February 16, 2016

Out of 3,912 sources identified in the GHDx, 2,818 sources were included.

#### WHO InfoBase and International Smoking Statistics (ISS) Database

An effort was made to replace database-derived estimates used in GBD 2013 with original extractions from primary data sources. In GBD 2013, [851] sources were derived from the WHO InfoBase or the ISS Database. In GBD 2015, we replaced [257] sources with extractions from primary data sources and continued to use [594] sources from the WHO InfoBase (n=[281]) and the ISS Database (n=[313]).

#### **Outliers**

Throughout the modeling process, data were assessed for bias and outliers were flagged. A data point was flagged as a candidate outlier if it was not consistent with the majority of other data points in a country with respect to level, age-pattern, sex-pattern, or temporal trend. In data-scarce countries, data points were also compared to data from other countries in a region. Candidate outliers were scrutinized for potential sources of bias and were ultimately excluded if the point or source was deemed to not be representative.

#### Modeling strategy

#### Data Extraction

When possible, we extracted individual smoking status for all available frequency-type categories (listed above) from person-level microdata and collapsed these data to produce prevalence estimates in the standard GBD 5-year age-sex groups. If microdata were unavailable we extracted the most granular age-sex groups available from survey reports. Any available measures of uncertainty were extracted, including standard error, confidence or uncertainty intervals, and sample size.

#### Data Preparation: Crosswalking

Regressions to crosswalk other frequency-type categories to the gold-standard definition of daily use of smoked tobacco were estimated in the form:

$$p_{daily-smoked,k} = \beta_1 p_{i,k} + \epsilon_k$$

where  $p_{daily\text{-smoked},k}$  is the prevalence of daily smoking reported in survey k, and  $p_{i,k}$  is the prevalence of an alternative frequency-type combination i also reported in survey k. Consistent with previous GBD smoking crosswalks, the intercept was omitted from the regression. The estimated regression coefficient  $\beta_1$  was used to crosswalk alternative frequency-type categories to the gold-standard daily smoking definition in sources only providing the alternative category. Predication error at the data-point level was used to propagate uncertainty and was calculated using the following equation:

$$PE_k = \sigma_{\epsilon}^2 + X_k^2 var(\hat{\beta})$$

Compared to the separate frequency and type crosswalks used in GBD 2013, the combined frequency-type crosswalk used in GBD 2015 represents an improvement because patterns in frequency that may vary by type and patterns in type that may vary by frequency are captured.

#### Data Preparation: Age and Sex Splitting

Report data provided in age groups wider than the standard GBD 5-year age groups or as both sexes combined were split using the approach used in Ng et al. Briefly, age-sex patterns were identified using sources with data on multiple age-sex groups and these patterns were applied to split aggregated report data. Uncertainty in the age-sex split was propagated by multiplying the standard error of the data (including the predication error of the crosswalk) by the square root of the number of splits performed.

### Modeling: Linear Model

After data preparation, the dataset consisted of prevalence estimates of daily smoked tobacco use in standard GBD country-year-age-sex groups. The mean function used in ST-GPR was estimated using the following hierarchical mixed-effects linear regression, run separately by sex:

$$logit(p_{c,a,t}) = \beta_0 + \beta_1 CPC_{c,t} + \sum_{k=2}^{16} \beta_k I_{A[a]} + \alpha_s + \alpha_r + \alpha_c + \epsilon_{c,a,t}$$

where  $CPC_{c,t}$  is the annual tobacco consumption per capita covariate,  $I_{A[a]}$  is a dummy variable indicating specific age group A that the prevalence point  $p_{c,a,t}$  is capturing, and  $\alpha_s$ ,  $\alpha_r$ , and  $\alpha_c$  are super region, region, and country-specific random effects.

### Modeling: Spatio-Temporal Gaussian Process Regression (ST-GPR)

The estimated mean function was then propagated through the ST-GPR framework to obtain 1,000 draws of smoking prevalence estimates for each location, year, age, and sex. Parameter selection for the ST-GPR hyper-parameters were selected through out-of-sample cross-validation using the strategy described elsewhere in this appendix.

# Theoretical minimum-risk exposure level

The theoretical minimum-risk exposure level is that no one in the population smokes tobacco; that is, the smoking impact ratio is zero and smoking prevalence is zero.

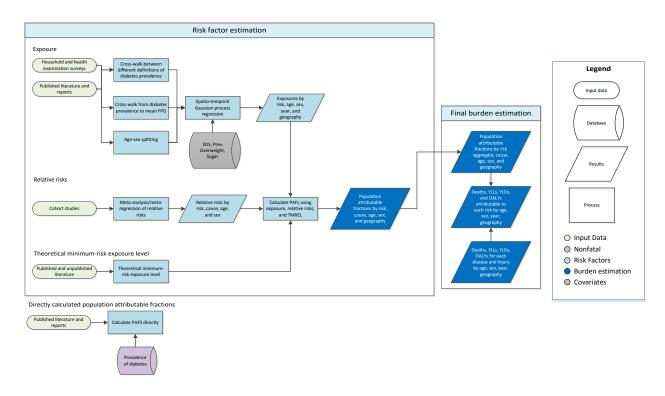
#### Relative risk

We have made no substantive updates to relative risks for outcomes included in GBD 2013.

# High Fasting Plasma Glucose/Diabetes

# **Flowchart**

### High fasting plasma glucose



# **Input Data & Methodological Summary**

# **Exposure**

#### **Case Definition**

We measure fasting plasma glucose as a continuous exposure in units of mmol/L and define diabetes according to the American Diabetes Association (ADA) and World Health Organization (WHO) diagnostic guidelines as FPG > 7.0 mmol/L and/or currently taking diabetes.<sup>1,2</sup>

### **Input Data**

Consistent with GBD 2013, we utilized data on mean fasting plasma glucose from literature and from household survey microdata and reports (e.g. STEPS, NHANES). Please see appendix for a full list of included sources. In GBD 2013, a systematic review of the literature was completed to capture population survey data on mean fasting plasma glucose. For GBD 2015, we updated the systematic review using the same strategy, drawing from the GHDx and Medline via PubMed. In total, we have utilized 717 sources corresponding to 24,926 unique data points.

### Global Health Data Exchange Database

We systematically searched the Global Health Data Exchange (GHDx) for multi-country survey programs, national surveys, and longitudinal studies which provide measured individual level data on fasting plasma glucose. The search was completed for systolic blood pressure, fasting plasma glucose, and blood cholesterol simultaneously, as many sources studying the other metabolic risks will often report mean fasting plasma glucose or diabetes prevalence.

Search Terms (Keywords): Blood pressure OR Blood glucose OR Glucose tests OR Cholesterol OR Cholesterol tests OR Hypercholesterolemia

Data Type: Survey OR Report Search date: 2/6/2016

#### Literature Review

We systematically searched PubMed for articles published between 15 July 2009 and 31 December 2015 which provided national or subnational estimates of mean fasting plasma glucose. As above, the literature review was completed for systolic blood pressure, fasting plasma glucose, and blood cholesterol simultaneously for the reasons previously stated.

#### Search terms:

(("hypertension"[Mesh:NoExp] OR "blood pressure"[Mesh:NoExp] OR "Hyperlipidemias"[Mesh:NoExp] OR "Hypercholesterolemia"[Mesh] OR "Cholesterol"[Mesh] OR "diabetes mellitus"[Mesh:NoExp] OR "diabetes mellitus, type 2"[Mesh] OR "glucose"[Mesh] OR "hyperglycemia"[Mesh] OR

"prediabetic state" [Mesh]) AND "Geographic Locations" [Mesh] NOT "United States" [Mesh]) AND ("humans" [Mesh] AND "adult" [MeSH]) AND ("Data Collection" [Mesh]) OR "Health Services Research" [Mesh] OR "Population Surveillance" [Mesh] OR "Vital statistics" [Mesh] OR "Population" [Mesh] OR "Epidemiology" [Mesh] OR "surve\*" [TiAb]) NOT Comment [ptyp] NOT Case Reports [ptyp] AND ("2009/07/15" [PDAT]: "2015/12/31" [PDAT]) NOT "hospital" [TiAb]

Search date: 1/26/2016

### **Expert Groups**

To capture any remaining sources not identified in the GHDx or in PubMed, we looked to other leaders in the field to ensure our datasets were as comprehensive as possible. These included the IDF Atlas Database and a recent publication on diabetes from the NCD Risk Factor Collaboration. <sup>3,4</sup>

### Inclusion Criteria

Studies were included if they were population-based and measured glucose using a blood test (as FPG, HbA1c). We accepted data on diabetes prevalence only if the study performed an objective blood measurement and/or individuals reported self-report of taking anti-diabetic medication. Studies that included self-report of diabetes were excluded. We assumed the data is representative of the location if the geography was not related to the diseases (a mining area) and if it is not an outlier compared to other data in the country or region.

#### **Outliers**

Data was utilized in the modeling process unless an assessment of data showed that the data is biased. A data point was considered to be an outlier candidate if the level is not consistent with other (sources) country data, or - if there are no other data points - not consistent with other country in the region. A candidate outlier source was scrutinized and validated and the data point was excluded if the quality of study did not warrant a valid estimate because of selection (specific populations), different definitions, other biases, or if the study did not provide methodological details for evaluation.

#### Data Extraction

Where possible, individual level data on fasting plasma glucose was extracted from survey microdata and these were collapsed across demographic groupings to produce mean estimates in the standard GBD 5-year age-sex groups. If microdata were unavailable, information from survey reports or from literature were extracted along with any available measure of uncertainty including standard error, uncertainty intervals, and sample size.

Survey reports and literature often only report information on diabetes prevalence in the population studied. If the study was otherwise representative, we extracted data on the prevalence of diabetes and, using all available data with both estimates of mean fasting plasma glucose and prevalence of diabetes, crosswalked this to estimates of mean fasting plasma glucose.

# Crosswalk from Prevalence of Diabetes and HbA1c

We used a mixed-effects regression to crosswalk estimates of diabetes prevalence to the mean fasting plasma glucose of a given population. A separate regression was run for a given diagnostic criteria using the form:

$$log(FPG_{c,a,s,t,k}) = \beta_0 + \beta_1 logit(p_{c,a,s,t,k}) + \beta_2 male + \sum_{k=10}^{21} \beta_k I_{A[a]} + \alpha_s + \epsilon_{c,a,s,t,k}$$

Where  $FPG_{c,a,s,t,k}$  is the outcome of interest—the mean fasting plasma glucose of a given country-, age-, sex-, time-, from survey k;  $p_{c,a,s,t,k}$  is the prevalence of diabetes for a given definition or the mean HbA1c level;  $I_{A[a]}$  is a dummy variable indicating a specific age group A; and  $\alpha_s$  is a super-region specific random effect.

### Age and Sex Splitting

Prior to modeling, data provided in age groups wider than the GBD 5-year age groups were split using the approach outlined in Ng et al.<sup>5</sup> Briefly, age-sex patterns were identified using sources of data with multiple age-sex groups and these patterns were applied to split aggregated report data. Uncertainty in the age-sex split was propagated by multiplying the standard error of the data performed by the square root of the number of splits performed.

# Modeling

Exposure estimates were produced from 1980 to 2015 for each national and subnational location, sex, and for each 5-year age group starting from 25+. As in GBD 2013, we used a Spatio-Temporal Gaussian Process Regression (ST-GPR) framework to model the mean fasting plasma glucose at the location-, year-, age-, sex- level. Updates to the ST-GR modeling framework for GBD 2015 are detailed in the appendix.

The FPG mean function was estimated using a mixed-effects linear regression, run separately by sex:

$$logit(FPG_{c,a,t}) = \beta_0 + \beta_1 SDS_{c,t} + \beta_2 p_{overweight_{c,a,t}} + \beta_2 log(sugar_{c,t}) + \sum_{k=2}^{16} \beta_k I_{A[a]} + \alpha_s + \alpha_r + \alpha_c + \epsilon_{c,a,t}$$

where  $SDS_{c,t}$  is socio-demographic status (SDS), an index metric that includes a measure of education and income,  $p_{overweight_{c,a,t}}$  is the prevalence of overweight,  $sugar_{c,t}$  is the diet adjusted mean consumption of sugar in grams per capita per day,  $I_{A[a]}$  is a dummy variable for a fixed effect on a given 5-year age group, and  $\alpha_s$   $\alpha_r$   $\alpha_c$  are random effects at the super-region, region, and country level, respectively.

The estimates were then propagated through the ST-GPR framework to obtain 1000 draws for each location, year, age, and sex.

# Theoretical minimum-risk exposure level

As in GBD 2013, the theoretical minimum risk exposure level for fasting plasma glucose is between 4.9 and 5.3 mmol/l (uniformly distributed) with a standard deviation 0.3mmol/l. This SD is the lowest reported in population data, after correction for the effects of one-time measurement. We used the same TMREL at all ages because FPG does not rise sharply with age in populations with low blood glucose.

#### Relative risks

We used Dismod-MR 2.1 to pool effect sizes from included studies and generate a dose-response curve for each of the outcomes associated with high fasting plasma glucose. The tool enabled us to incorporate random effects across studies and include data with different age ranges. RRs were used universally for all countries and the meta-regression only helped to pool the three major sources and produce RRs with uncertainty and covariance across ages taking into account the uncertainty of the data points

We have updated the relative risks for tuberculosis as an outcome of diabetes using evidence from recent health record linkage studies from the UK, Australia, and Taiwan, as well as other prospective cohort studies. A full list of studies utilized is available in the GBD Data Input Sources Tool (http://ghdx.healthdata.org/gbd-2015/data-input-sources).

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# Comparative risk assessment input data sources

### Alcohol

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## Supporting tables

Estimated observed age-standardized rates per 100,000 population of tuberculosis incidence, prevalence, and mortality by SDI values and GBD regions (1990-2015)

			Age-	Age-	Age-	
Pagion	Year	Measure name	standardized rate	standardized rate (upper UI)	standardized rate (lower UI)	SDI
Region					-	
Andean Latin America	1990	Deaths	45.08776	52.48011	25.7536	0.601325
Andean Latin America	1995	Deaths	32.69077	36.5084	21.54882	0.639461
Andean Latin America	2000	Deaths	19.44014	26.61469	16.99428	0.670974
Andean Latin America	2005	Deaths	12.94081	21.85466	10.81688	0.697096
Andean Latin America	2010	Deaths	10.07427	17.26081	8.223418	0.71593
Andean Latin America	2015	Deaths	8.021127	13.7786	6.411995	0.72763
Australasia	1990	Deaths	0.6143669	0.651797	0.5800975	0.840012
Australasia	1995	Deaths	0.5183212	0.552121	0.4889815	0.85437
Australasia	2000	Deaths	0.3777746	0.4072935	0.3507334	0.868379
Australasia	2005	Deaths	0.2859598	0.3077561	0.2649559	0.877539
Australasia	2010	Deaths	0.2343584	0.2537572	0.2165849	0.883589
Australasia	2015	Deaths	0.1940164	0.2146099	0.1765191	0.899057
Caribbean	1990	Deaths	9.12256	11.36072	7.47213	0.617814
Caribbean	1995	Deaths	7.66401	10.48109	6.3658	0.643936
Caribbean	2000	Deaths	5.784394	8.426455	4.765159	0.662542
Caribbean	2005	Deaths	4.98236	7.708997	4.055435	0.684099
Caribbean	2010	Deaths	4.40973	6.872485	3.468326	0.701189
Caribbean	2015	Deaths	3.868697	6.108238	2.944126	0.718367
Central Asia	1990	Deaths	11.8257	15.07184	10.84452	0.692146
Central Asia	1995	Deaths	16.79969	18.98949	14.57928	0.710885
Central Asia	2000	Deaths	18.12281	19.50941	14.0373	0.713923
Central Asia	2005	Deaths	14.85189	16.40959	11.04766	0.717763
Central Asia	2010	Deaths	9.853176	10.99461	7.109218	0.73416
Central Asia	2015	Deaths	7.497567	8.542369	5.377879	0.75339

			Age-	Age-	Age-	
_			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Central Europe	1990	Deaths	4.644161	4.831375	4.394154	0.790899
Central Europe	1995	Deaths	4.685606	4.878566	4.456074	0.813739
Central Europe	2000	Deaths	3.545461	3.706341	3.395306	0.830631
Central Europe	2005	Deaths	2.687033	2.827896	2.571642	0.847861
Central Europe	2010	Deaths	1.95977	2.082059	1.859713	0.864726
Central Europe	2015	Deaths	1.408289	1.54189	1.303779	0.877895
Central Latin America	1990	Deaths	12.84481	13.29431	12.35349	0.587256
Central Latin America	1995	Deaths	9.096785	9.443501	8.757981	0.626313
Central Latin America	2000	Deaths	6.071781	6.392597	5.838161	0.660288
Central Latin America	2005	Deaths	4.33181	4.632918	4.123728	0.69047
Central Latin America	2010	Deaths	3.38158	3.645358	3.211991	0.71747
Central Latin America	2015	Deaths	2.729414	2.964329	2.561658	0.750288
Central Sub-Saharan Africa	1990	Deaths	123.0931	195.227	72.13969	0.374714
Central Sub-Saharan Africa	1995	Deaths	119.8393	192.2082	70.26181	0.388388
Central Sub-Saharan Africa	2000	Deaths	122.5348	215.6073	67.4541	0.397329
Central Sub-Saharan Africa	2005	Deaths	117.4818	224.2599	61.11993	0.408764
Central Sub-Saharan Africa	2010	Deaths	102.9516	207.103	52.00188	0.429405
Central Sub-Saharan Africa	2015	Deaths	90.27635	190.2691	44.74809	0.459795
East Asia	1990	Deaths	20.62702	25.67707	14.52637	0.633319
East Asia	1995	Deaths	14.68221	18.5302	11.17895	0.666821
East Asia	2000	Deaths	10.56434	13.47117	8.347295	0.688894
East Asia	2005	Deaths	7.489061	10.09333	6.200875	0.71325
East Asia	2010	Deaths	4.803712	7.146656	4.256732	0.740004
East Asia	2015	Deaths	3.469149	5.331192	3.015945	0.763711
Eastern Europe	1990	Deaths	6.023856	6.350883	5.726793	0.803907
Eastern Europe	1995	Deaths	10.47857	11.06105	9.935015	0.821964
Eastern Europe	2000	Deaths	13.03026	13.78152	12.27318	0.822386
Eastern Europe	2005	Deaths	13.3762	14.14365	12.66825	0.836392

			Age-	Age-	Age-	
			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Eastern Europe	2010	Deaths	8.36956	8.83834	7.92129	0.852063
Eastern Europe	2015	Deaths	5.767319	6.282576	5.344111	0.857602
Eastern Sub-Saharan Africa	1990	Deaths	110.8959	145.7595	84.04543	0.281544
Eastern Sub-Saharan Africa	1995	Deaths	104.5656	135.2673	80.43492	0.318378
Eastern Sub-Saharan Africa	2000	Deaths	95.74614	116.7632	74.70579	0.351583
Eastern Sub-Saharan Africa	2005	Deaths	82.32882	99.95204	61.00378	0.380305
Eastern Sub-Saharan Africa	2010	Deaths	69.34613	87.56031	48.4827	0.417935
Eastern Sub-Saharan Africa	2015	Deaths	60.1277	80.10948	38.7518	0.461506
Global	1990	Deaths	38.30006	46.74847	31.88863	0.600264
Global	1995	Deaths	33.37294	40.47794	27.78737	0.627114
Global	2000	Deaths	28.79493	35.10084	24.16688	0.647289
Global	2005	Deaths	24.23698	29.85273	20.78274	0.667388
Global	2010	Deaths	19.51306	24.16982	16.43354	0.690595
Global	2015	Deaths	16.04776	20.07927	13.14564	0.714202
High-income Asia Pacific	1990	Deaths	7.170949	7.456916	6.897102	0.831853
High-income Asia Pacific	1995	Deaths	5.250116	5.463492	5.06481	0.851327
High-income Asia Pacific	2000	Deaths	3.907267	4.066556	3.749344	0.866302
High-income Asia Pacific	2005	Deaths	2.79461	2.913861	2.671279	0.877038
High-income Asia Pacific	2010	Deaths	2.088176	2.184366	1.987694	0.886374
High-income Asia Pacific	2015	Deaths	1.755804	1.864571	1.653605	0.89541
High-income North America	1990	Deaths	0.7747455	0.8042565	0.7456377	0.868053
High-income North America	1995	Deaths	0.5872544	0.607993	0.5663421	0.878745
High-income North America	2000	Deaths	0.3797887	0.3938336	0.3661008	0.883605
High-income North America	2005	Deaths	0.2668204	0.2766664	0.2578901	0.887351
High-income North America	2010	Deaths	0.2093715	0.2171541	0.2016891	0.898744
High-income North America	2015	Deaths	0.1921448	0.2009709	0.1831634	0.904939
North Africa and Middle East	1990	Deaths	11.71415	15.23024	8.842072	0.49152
North Africa and Middle East	1995	Deaths	10.60152	14.46618	8.194139	0.546441

			Age-	Age-	Age-	
	.,		standardized	standardized	standardized	65.
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
North Africa and Middle East	2000	Deaths	8.668694	11.95729	6.80521	0.588397
North Africa and Middle East	2005	Deaths	7.070056	9.60323	5.734939	0.625746
North Africa and Middle East	2010	Deaths	5.824667	7.775678	4.756512	0.654996
North Africa and Middle East	2015	Deaths	4.969915	6.751378	4.073385	0.685326
Oceania	1990	Deaths	23.02934	30.42657	14.14195	0.438439
Oceania	1995	Deaths	19.85829	26.79768	12.19227	0.463919
Oceania	2000	Deaths	16.74446	22.92432	10.58704	0.485921
Oceania	2005	Deaths	15.29719	21.61117	9.870066	0.507076
Oceania	2010	Deaths	13.49468	19.77937	8.630818	0.53028
Oceania	2015	Deaths	11.07693	16.69324	6.940259	0.554062
South Asia	1990	Deaths	119.8849	147.9572	98.95502	0.476193
South Asia	1995	Deaths	102.2134	123.5927	82.27892	0.512074
South Asia	2000	Deaths	84.88206	103.4164	69.57119	0.545809
South Asia	2005	Deaths	69.7662	85.7254	58.07809	0.580087
South Asia	2010	Deaths	55.37944	68.31906	44.40387	0.623476
South Asia	2015	Deaths	44.21226	54.01417	34.04633	0.662867
Southeast Asia	1990	Deaths	103.2428	131.1842	82.96793	0.569708
Southeast Asia	1995	Deaths	84.59319	108.0541	70.25538	0.6022
Southeast Asia	2000	Deaths	69.36918	88.72087	58.99017	0.631533
Southeast Asia	2005	Deaths	57.07634	73.3271	49.62849	0.657146
Southeast Asia	2010	Deaths	45.40519	58.08747	39.03452	0.682571
Southeast Asia	2015	Deaths	35.30699	46.53773	29.44505	0.710333
Southern Latin America	1990	Deaths	5.950096	6.207684	5.677673	0.686197
Southern Latin America	1995	Deaths	4.315772	4.497155	4.131996	0.712315
Southern Latin America	2000	Deaths	3.146322	3.281912	3.011304	0.741715
Southern Latin America	2005	Deaths	2.57956	2.698499	2.465368	0.761742
Southern Latin America	2010	Deaths	2.043674	2.150949	1.94551	0.779703
Southern Latin America	2015	Deaths	1.643693	1.789897	1.52577	0.799786

			Age-	Age-	Age-	
	.,		standardized	standardized	standardized	651
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Southern Sub-Saharan Africa	1990	Deaths	94.33802	136.1191	75.66142	0.596739
Southern Sub-Saharan Africa	1995	Deaths	87.7499	126.1095	68.88481	0.635365
Southern Sub-Saharan Africa	2000	Deaths	100.5406	125.263	82.36133	0.664257
Southern Sub-Saharan Africa	2005	Deaths	98.94093	118.0077	71.1957	0.687727
Southern Sub-Saharan Africa	2010	Deaths	83.17465	99.1334	55.313	0.709034
Southern Sub-Saharan Africa	2015	Deaths	68.42937	83.53739	48.04899	0.725498
Tropical Latin America	1990	Deaths	8.373291	10.32205	6.266958	0.569258
Tropical Latin America	1995	Deaths	7.367558	8.261088	5.207918	0.617964
Tropical Latin America	2000	Deaths	6.251776	7.054482	4.454754	0.656385
Tropical Latin America	2005	Deaths	4.654014	5.568471	3.397116	0.687499
Tropical Latin America	2010	Deaths	3.552451	4.463313	2.481029	0.718198
Tropical Latin America	2015	Deaths	3.033846	3.911268	2.105511	0.745259
Western Europe	1990	Deaths	1.691211	1.750056	1.63696	0.821363
Western Europe	1995	Deaths	1.369054	1.41532	1.319519	0.840038
Western Europe	2000	Deaths	0.9786834	1.014148	0.9435137	0.853982
Western Europe	2005	Deaths	0.6728166	0.6977046	0.6494218	0.864865
Western Europe	2010	Deaths	0.5036525	0.5253921	0.484591	0.873457
Western Europe	2015	Deaths	0.4267431	0.4507562	0.4040926	0.883729
Western Sub-Saharan Africa	1990	Deaths	74.88242	106.3735	59.96101	0.340553
Western Sub-Saharan Africa	1995	Deaths	69.30402	96.83392	58.69847	0.369715
Western Sub-Saharan Africa	2000	Deaths	63.07497	90.20752	53.59168	0.392736
Western Sub-Saharan Africa	2005	Deaths	54.04531	76.22352	45.51217	0.414057
Western Sub-Saharan Africa	2010	Deaths	45.62548	66.38252	37.79426	0.436146
Western Sub-Saharan Africa	2015	Deaths	40.2643	60.61897	32.20811	0.476049
Andean Latin America	1990	Incidence	259.2294	279.4606	241.1221	0.601325
Andean Latin America	1995	Incidence	178.0467	192.9623	165.7883	0.639461
Andean Latin America	2000	Incidence	127.2961	136.6964	118.4	0.670974
Andean Latin America	2005	Incidence	91.31606	99.06165	84.1361	0.697096

			Age-	Age-	Age-	
			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Andean Latin America	2010	Incidence	75.87544	82.75185	68.99511	0.71593
Andean Latin America	2015	Incidence	72.73984	82.25491	65.08868	0.72763
Australasia	1990	Incidence	9.891301	11.99215	8.010864	0.840012
Australasia	1995	Incidence	8.307131	9.609564	6.98528	0.85437
Australasia	2000	Incidence	7.204093	8.204629	6.3124	0.868379
Australasia	2005	Incidence	7.336495	8.583173	6.183693	0.877539
Australasia	2010	Incidence	7.391374	8.85867	5.971319	0.883589
Australasia	2015	Incidence	7.548313	9.164231	6.084138	0.899057
Caribbean	1990	Incidence	57.28107	61.77377	53.56923	0.617814
Caribbean	1995	Incidence	51.0696	54.26877	48.14433	0.643936
Caribbean	2000	Incidence	42.63546	45.83552	40.02717	0.662542
Caribbean	2005	Incidence	37.37204	40.0534	34.87413	0.684099
Caribbean	2010	Incidence	34.2431	36.83928	31.81842	0.701189
Caribbean	2015	Incidence	34.63864	37.79518	31.62318	0.718367
Central Asia	1990	Incidence	133.3442	143.6137	123.4556	0.692146
Central Asia	1995	Incidence	142.0388	152.3795	132.8762	0.710885
Central Asia	2000	Incidence	135.3439	145.5954	126.8971	0.713923
Central Asia	2005	Incidence	135.5666	145.1741	126.8527	0.717763
Central Asia	2010	Incidence	104.9213	113.674	97.24607	0.73416
Central Asia	2015	Incidence	96.63054	105.3926	88.70994	0.75339
Central Europe	1990	Incidence	55.84333	59.58976	51.57142	0.790899
Central Europe	1995	Incidence	60.75566	64.19437	57.03596	0.813739
Central Europe	2000	Incidence	51.62664	55.16563	48.00411	0.830631
Central Europe	2005	Incidence	42.24123	45.23769	39.10761	0.847861
Central Europe	2010	Incidence	34.31984	36.92306	31.70568	0.864726
Central Europe	2015	Incidence	31.82835	34.43869	29.17114	0.877895
Central Latin America	1990	Incidence	67.3776	70.75385	62.42073	0.587256
Central Latin America	1995	Incidence	60.02903	64.43337	54.66381	0.626313

			Age-	Age-	Age-	
			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Central Latin America	2000	Incidence	45.6055	48.57533	42.27019	0.660288
Central Latin America	2005	Incidence	33.79435	36.15591	31.19308	0.69047
Central Latin America	2010	Incidence	27.50171	29.0609	25.7984	0.71747
Central Latin America	2015	Incidence	26.73988	28.60224	24.87491	0.750288
Central Sub-Saharan Africa	1990	Incidence	331.8451	369.6746	303.0722	0.374714
Central Sub-Saharan Africa	1995	Incidence	318.7483	353.7802	292.6418	0.388388
Central Sub-Saharan Africa	2000	Incidence	309.0733	339.5347	283.6701	0.397329
Central Sub-Saharan Africa	2005	Incidence	300.5246	331.9109	274.8132	0.408764
Central Sub-Saharan Africa	2010	Incidence	269.0284	297.6971	245.3517	0.429405
Central Sub-Saharan Africa	2015	Incidence	270.1681	300.426	241.5851	0.459795
East Asia	1990	Incidence	137.4133	161.2563	119.1104	0.633319
East Asia	1995	Incidence	123.31	143.1047	108.1087	0.666821
East Asia	2000	Incidence	118.6791	137.025	104.591	0.688894
East Asia	2005	Incidence	118.4773	131.5945	107.3066	0.71325
East Asia	2010	Incidence	96.01259	107.6627	86.28828	0.740004
East Asia	2015	Incidence	97.54379	110.7614	88.13359	0.763711
Eastern Europe	1990	Incidence	114.8245	123.0995	105.8022	0.803907
Eastern Europe	1995	Incidence	153.0282	166.0996	141.7361	0.821964
Eastern Europe	2000	Incidence	156.5982	170.2212	141.6483	0.822386
Eastern Europe	2005	Incidence	165.9071	176.167	152.6573	0.836392
Eastern Europe	2010	Incidence	136.0426	144.9263	125.8478	0.852063
Eastern Europe	2015	Incidence	116.9392	125.3031	106.4922	0.857602
Eastern Sub-Saharan Africa	1990	Incidence	250.0283	275.9663	229.7619	0.281544
Eastern Sub-Saharan Africa	1995	Incidence	241.3245	264.4172	224.5359	0.318378
Eastern Sub-Saharan Africa	2000	Incidence	238.4631	261.1331	222.2519	0.351583
Eastern Sub-Saharan Africa	2005	Incidence	215.6448	235.5818	201.1194	0.380305
Eastern Sub-Saharan Africa	2010	Incidence	191.5941	209.8603	178.6776	0.417935
Eastern Sub-Saharan Africa	2015	Incidence	186.5245	205.6725	171.5233	0.461506

			Age-	Age-	Age-	
	.,		standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Global	1990	Incidence	175.4216	196.7353	158.6584	0.600264
Global	1995	Incidence	161.1128	180.67	146.4408	0.627114
Global	2000	Incidence	153.3905	172.6043	139.3232	0.647289
Global	2005	Incidence	140.4923	155.7684	129.2215	0.667388
Global	2010	Incidence	125.3419	139.6078	114.4716	0.690595
Global	2015	Incidence	119.6398	134.0403	108.138	0.714202
High-income Asia Pacific	1990	Incidence	76.95872	83.53324	69.44547	0.831853
High-income Asia Pacific	1995	Incidence	53.30511	57.7201	48.39359	0.851327
High-income Asia Pacific	2000	Incidence	40.40483	44.46853	36.35609	0.866302
High-income Asia Pacific	2005	Incidence	35.87811	39.43592	32.31981	0.877038
High-income Asia Pacific	2010	Incidence	31.8028	34.39963	29.11024	0.886374
High-income Asia Pacific	2015	Incidence	31.22259	33.79673	28.67483	0.89541
High-income North America	1990	Incidence	10.79296	13.09793	8.553621	0.868053
High-income North America	1995	Incidence	6.447406	7.30672	5.612743	0.878745
High-income North America	2000	Incidence	5.003774	5.723757	4.298214	0.883605
High-income North America	2005	Incidence	4.687837	5.387771	3.985445	0.887351
High-income North America	2010	Incidence	3.638322	4.118258	3.179199	0.898744
High-income North America	2015	Incidence	3.824385	4.508888	3.187629	0.904939
North Africa and Middle East	1990	Incidence	62.88132	69.20137	57.07645	0.49152
North Africa and Middle East	1995	Incidence	54.42453	59.5713	49.68985	0.546441
North Africa and Middle East	2000	Incidence	46.53615	50.77685	42.46517	0.588397
North Africa and Middle East	2005	Incidence	40.55809	44.4038	36.89243	0.625746
North Africa and Middle East	2010	Incidence	36.6939	40.46652	33.34383	0.654996
North Africa and Middle East	2015	Incidence	36.73334	41.18154	32.70024	0.685326
Oceania	1990	Incidence	81.80069	90.27396	75.39917	0.438439
Oceania	1995	Incidence	77.92369	85.24641	71.79372	0.463919
Oceania	2000	Incidence	74.11682	81.80111	68.25436	0.485921
Oceania	2005	Incidence	66.69882	73.87242	61.36456	0.507076

			Age-	Age-	Age-	
			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Oceania	2010	Incidence	62.4368	68.60679	57.22836	0.53028
Oceania	2015	Incidence	67.43916	75.25967	60.98198	0.554062
South Asia	1990	Incidence	393.9562	451.1501	348.7045	0.476193
South Asia	1995	Incidence	351.0049	404.6818	310.4736	0.512074
South Asia	2000	Incidence	318.5684	368.2442	281.5246	0.545809
South Asia	2005	Incidence	263.6429	297.2838	235.2517	0.580087
South Asia	2010	Incidence	232.7328	261.5315	207.2396	0.623476
South Asia	2015	Incidence	204.4198	231.2269	181.1451	0.662867
Southeast Asia	1990	Incidence	385.0262	416.5152	358.9582	0.569708
Southeast Asia	1995	Incidence	319.4864	344.7288	298.1847	0.6022
Southeast Asia	2000	Incidence	291.1298	316.1901	272.0249	0.631533
Southeast Asia	2005	Incidence	249.7723	269.6911	232.7942	0.657146
Southeast Asia	2010	Incidence	220.6111	241.0015	206.0863	0.682571
Southeast Asia	2015	Incidence	208.7291	229.7336	192.8496	0.710333
Southern Latin America	1990	Incidence	48.35102	52.13338	44.27235	0.686197
Southern Latin America	1995	Incidence	38.72194	41.42699	35.28246	0.712315
Southern Latin America	2000	Incidence	34.95071	37.67014	32.35303	0.741715
Southern Latin America	2005	Incidence	27.36976	29.56432	25.26999	0.761742
Southern Latin America	2010	Incidence	24.7002	26.60832	22.78005	0.779703
Southern Latin America	2015	Incidence	23.50442	25.60374	21.37259	0.799786
Southern Sub-Saharan Africa	1990	Incidence	529.8512	608.3588	448.9415	0.596739
Southern Sub-Saharan Africa	1995	Incidence	551.2653	639.822	470.6725	0.635365
Southern Sub-Saharan Africa	2000	Incidence	678.6745	790.9196	588.3496	0.664257
Southern Sub-Saharan Africa	2005	Incidence	778.6144	913.6713	682.843	0.687727
Southern Sub-Saharan Africa	2010	Incidence	787.2392	919.1752	690.5623	0.709034
Southern Sub-Saharan Africa	2015	Incidence	724.6218	860.7267	621.4088	0.725498
Tropical Latin America	1990	Incidence	49.78968	57.81276	43.35041	0.569258
Tropical Latin America	1995	Incidence	46.14678	53.31418	40.3488	0.617964

			Age-	Age-	Age-	
			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Tropical Latin America	2000	Incidence	42.22425	49.08737	36.69271	0.656385
Tropical Latin America	2005	Incidence	41.14827	45.81338	36.33098	0.687499
Tropical Latin America	2010	Incidence	39.86771	41.7515	37.80948	0.718198
Tropical Latin America	2015	Incidence	35.03014	38.68136	30.93093	0.745259
Western Europe	1990	Incidence	25.93523	29.54231	22.71449	0.821363
Western Europe	1995	Incidence	19.41918	21.66106	17.42294	0.840038
Western Europe	2000	Incidence	14.67069	16.55044	12.92087	0.853982
Western Europe	2005	Incidence	12.32669	14.06659	10.77141	0.864865
Western Europe	2010	Incidence	10.4406	11.98379	8.927142	0.873457
Western Europe	2015	Incidence	10.61902	12.57972	8.759188	0.883729
Western Sub-Saharan Africa	1990	Incidence	187.9556	208.0269	173.8064	0.340553
Western Sub-Saharan Africa	1995	Incidence	177.5128	194.1947	164.6614	0.369715
Western Sub-Saharan Africa	2000	Incidence	170.0641	185.7849	157.6595	0.392736
Western Sub-Saharan Africa	2005	Incidence	158.379	173.0327	147.1326	0.414057
Western Sub-Saharan Africa	2010	Incidence	146.0309	160.3641	134.7667	0.436146
Western Sub-Saharan Africa	2015	Incidence	146.6701	162.7005	133.4244	0.476049
Andean Latin America	1990	Prevalence	172.9203	184.966	161.6407	0.601325
Andean Latin America	1995	Prevalence	117.4128	125.2576	110.2029	0.639461
Andean Latin America	2000	Prevalence	82.77686	88.34705	77.5192	0.670974
Andean Latin America	2005	Prevalence	58.76284	63.69952	54.27681	0.697096
Andean Latin America	2010	Prevalence	49.37034	53.87699	45.05118	0.71593
Andean Latin America	2015	Prevalence	47.95285	54.22791	42.73396	0.72763
Australasia	1990	Prevalence	4.898344	5.912738	3.885248	0.840012
Australasia	1995	Prevalence	4.129723	4.927222	3.424284	0.85437
Australasia	2000	Prevalence	3.575875	4.107608	3.081145	0.868379
Australasia	2005	Prevalence	3.641216	4.271626	3.015849	0.877539
Australasia	2010	Prevalence	3.706639	4.497083	2.958899	0.883589
Australasia	2015	Prevalence	3.802311	4.670052	3.020769	0.899057

			Age-	Age-	Age-	
			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Caribbean	1990	Prevalence	36.1638	38.44574	34.07988	0.617814
Caribbean	1995	Prevalence	31.77475	33.53046	30.10872	0.643936
Caribbean	2000	Prevalence	26.61617	28.25031	25.05506	0.662542
Caribbean	2005	Prevalence	23.47883	25.09092	21.89545	0.684099
Caribbean	2010	Prevalence	21.58023	23.12715	20.07885	0.701189
Caribbean	2015	Prevalence	21.82641	23.81129	19.85592	0.718367
Central Asia	1990	Prevalence	90.61837	96.84319	85.44526	0.692146
Central Asia	1995	Prevalence	106.9065	112.9908	101.3021	0.710885
Central Asia	2000	Prevalence	105.7566	112.2226	100.2559	0.713923
Central Asia	2005	Prevalence	98.31291	104.733	92.9463	0.717763
Central Asia	2010	Prevalence	80.13216	85.23547	75.05619	0.73416
Central Asia	2015	Prevalence	74.64805	81.23103	68.71758	0.75339
Central Europe	1990	Prevalence	27.78064	29.54008	26.00828	0.790899
Central Europe	1995	Prevalence	29.80622	31.43339	28.16103	0.813739
Central Europe	2000	Prevalence	26.03681	27.60109	24.50223	0.830631
Central Europe	2005	Prevalence	21.29889	22.71775	19.93959	0.847861
Central Europe	2010	Prevalence	17.4815	18.74768	16.25724	0.864726
Central Europe	2015	Prevalence	16.21988	17.56256	14.90462	0.877895
Central Latin America	1990	Prevalence	31.15122	32.9362	29.2935	0.587256
Central Latin America	1995	Prevalence	28.03602	30.12151	26.16323	0.626313
Central Latin America	2000	Prevalence	21.2154	22.57399	19.91727	0.660288
Central Latin America	2005	Prevalence	15.92988	17.03595	14.78995	0.69047
Central Latin America	2010	Prevalence	13.02035	13.82707	12.19107	0.71747
Central Latin America	2015	Prevalence	12.73324	13.67599	11.74048	0.750288
Central Sub-Saharan Africa	1990	Prevalence	291.1527	315.791	268.3526	0.374714
Central Sub-Saharan Africa	1995	Prevalence	273.7642	296.0363	253.0469	0.388388
Central Sub-Saharan Africa	2000	Prevalence	256.1596	278.7798	235.4036	0.397329
Central Sub-Saharan Africa	2005	Prevalence	239.1515	261.6869	218.0707	0.408764

			Age-	Age-	Age-	
			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Central Sub-Saharan Africa	2010	Prevalence	214.7525	234.5431	195.3621	0.429405
Central Sub-Saharan Africa	2015	Prevalence	219.0231	243.7254	194.9321	0.459795
East Asia	1990	Prevalence	155.7683	174.2929	138.501	0.633319
East Asia	1995	Prevalence	144.4398	158.4106	131.0818	0.666821
East Asia	2000	Prevalence	144.88	159.1071	130.7037	0.688894
East Asia	2005	Prevalence	129.9474	141.1815	119.1106	0.71325
East Asia	2010	Prevalence	124.1988	135.4612	112.8333	0.740004
East Asia	2015	Prevalence	123.5554	135.2937	112.4274	0.763711
Eastern Europe	1990	Prevalence	56.18814	59.58078	52.72581	0.803907
Eastern Europe	1995	Prevalence	76.65881	82.28704	72.07163	0.821964
Eastern Europe	2000	Prevalence	85.43962	91.60189	80.17805	0.822386
Eastern Europe	2005	Prevalence	94.26101	100.5325	88.58375	0.836392
Eastern Europe	2010	Prevalence	78.65072	83.86189	74.04079	0.852063
Eastern Europe	2015	Prevalence	63.54656	67.80974	59.36116	0.857602
Eastern Sub-Saharan Africa	1990	Prevalence	207.2653	224.0834	191.9857	0.281544
Eastern Sub-Saharan Africa	1995	Prevalence	198.2715	213.1737	184.7058	0.318378
Eastern Sub-Saharan Africa	2000	Prevalence	192.1825	205.8545	179.715	0.351583
Eastern Sub-Saharan Africa	2005	Prevalence	173.7006	185.7431	162.6214	0.380305
Eastern Sub-Saharan Africa	2010	Prevalence	157.5915	168.2428	148.0699	0.417935
Eastern Sub-Saharan Africa	2015	Prevalence	156.3925	168.9724	144.6342	0.461506
Global	1990	Prevalence	155.6543	170.8049	142.2851	0.600264
Global	1995	Prevalence	145.572	159.3543	133.8531	0.627114
Global	2000	Prevalence	141.5317	154.8688	129.7516	0.647289
Global	2005	Prevalence	129.6428	140.7603	119.5612	0.667388
Global	2010	Prevalence	123.1604	134.1084	113.5227	0.690595
Global	2015	Prevalence	120.323	131.5991	110.0002	0.714202
High-income Asia Pacific	1990	Prevalence	38.62818	41.51797	35.8963	0.831853
High-income Asia Pacific	1995	Prevalence	27.34416	29.61689	24.99053	0.851327

			Age-	Age-	Age-	
B	w		standardized	standardized	standardized	601
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
High-income Asia Pacific	2000	Prevalence	20.56504	22.61534	18.37646	0.866302
High-income Asia Pacific	2005	Prevalence	17.47615	19.24573	15.69199	0.877038
High-income Asia Pacific	2010	Prevalence	15.37219	16.69446	13.91245	0.886374
High-income Asia Pacific	2015	Prevalence	15.14696	16.55865	13.77238	0.89541
High-income North America	1990	Prevalence	5.499299	6.586417	4.404104	0.868053
High-income North America	1995	Prevalence	3.291302	3.732962	2.805992	0.878745
High-income North America	2000	Prevalence	2.547282	2.937061	2.143066	0.883605
High-income North America	2005	Prevalence	2.417279	2.822751	2.004627	0.887351
High-income North America	2010	Prevalence	1.893345	2.20504	1.610136	0.898744
High-income North America	2015	Prevalence	2.000257	2.385088	1.616336	0.904939
North Africa and Middle East	1990	Prevalence	45.70322	49.66086	41.95093	0.49152
North Africa and Middle East	1995	Prevalence	38.71048	42.04428	35.56811	0.546441
North Africa and Middle East	2000	Prevalence	32.92978	35.76895	30.19338	0.588397
North Africa and Middle East	2005	Prevalence	28.75238	31.24828	26.29384	0.625746
North Africa and Middle East	2010	Prevalence	26.12646	28.55511	23.75426	0.654996
North Africa and Middle East	2015	Prevalence	26.29818	29.40379	23.43584	0.685326
Oceania	1990	Prevalence	79.64565	85.61469	74.16448	0.438439
Oceania	1995	Prevalence	75.84589	81.50607	70.79701	0.463919
Oceania	2000	Prevalence	70.77253	75.90002	65.7298	0.485921
Oceania	2005	Prevalence	63.50135	68.47224	58.69209	0.507076
Oceania	2010	Prevalence	60.21642	65.19266	55.40218	0.53028
Oceania	2015	Prevalence	65.9924	72.65132	59.80518	0.554062
South Asia	1990	Prevalence	324.4472	368.2253	287.0908	0.476193
South Asia	1995	Prevalence	294.9989	333.5078	262.66	0.512074
South Asia	2000	Prevalence	276.5904	314.058	245.1999	0.545809
South Asia	2005	Prevalence	242.6637	270.6833	217.0052	0.580087
South Asia	2010	Prevalence	225.4191	251.5722	202.3049	0.623476
South Asia	2015	Prevalence	210.857	235.4756	188.2512	0.662867

			Age-	Age-	Age-	
			standardized	standardized	standardized	
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Southeast Asia	1990	Prevalence	399.9079	427.1265	375.6205	0.569708
Southeast Asia	1995	Prevalence	342.2998	364.1629	321.6325	0.6022
Southeast Asia	2000	Prevalence	305.804	324.5271	288.2515	0.631533
Southeast Asia	2005	Prevalence	263.5542	279.3815	248.7266	0.657146
Southeast Asia	2010	Prevalence	241.2851	256.7055	227.4238	0.682571
Southeast Asia	2015	Prevalence	228.7166	245.6128	213.4247	0.710333
Southern Latin America	1990	Prevalence	23.54664	25.4144	21.74816	0.686197
Southern Latin America	1995	Prevalence	22.29495	23.73417	20.84438	0.712315
Southern Latin America	2000	Prevalence	20.88479	22.66362	19.30866	0.741715
Southern Latin America	2005	Prevalence	15.43906	16.56857	14.31069	0.761742
Southern Latin America	2010	Prevalence	13.78344	14.82549	12.70107	0.779703
Southern Latin America	2015	Prevalence	12.93989	14.07426	11.84859	0.799786
Southern Sub-Saharan Africa	1990	Prevalence	452.9378	517.4634	393.3497	0.596739
Southern Sub-Saharan Africa	1995	Prevalence	465.9857	533.3058	402.2654	0.635365
Southern Sub-Saharan Africa	2000	Prevalence	579.389	656.6725	504.9592	0.664257
Southern Sub-Saharan Africa	2005	Prevalence	661.1552	750.5378	582.8415	0.687727
Southern Sub-Saharan Africa	2010	Prevalence	664.2596	748.5427	592.1942	0.709034
Southern Sub-Saharan Africa	2015	Prevalence	630.6485	718.3207	547.4907	0.725498
Tropical Latin America	1990	Prevalence	35.67221	40.96439	30.33253	0.569258
Tropical Latin America	1995	Prevalence	33.20657	38.41043	28.19482	0.617964
Tropical Latin America	2000	Prevalence	30.51859	35.28632	25.98006	0.656385
Tropical Latin America	2005	Prevalence	28.91208	32.24088	25.24616	0.687499
Tropical Latin America	2010	Prevalence	27.97399	30.34158	25.85077	0.718198
Tropical Latin America	2015	Prevalence	25.06443	28.02801	21.91971	0.745259
Western Europe	1990	Prevalence	13.21068	14.83147	11.53078	0.821363
Western Europe	1995	Prevalence	10.66963	11.70494	9.5986	0.840038
Western Europe	2000	Prevalence	7.665274	8.627129	6.763092	0.853982
Western Europe	2005	Prevalence	6.209459	7.030667	5.358189	0.864865

			Age-	Age-	Age-	
Basian	Vaar	NA consume manage	standardized	standardized	standardized	CDI
Region	Year	Measure name	rate	rate (upper UI)	rate (lower UI)	SDI
Western Europe	2010	Prevalence	5.228542	6.005465	4.416921	0.873457
Western Europe	2015	Prevalence	5.347457	6.322089	4.360903	0.883729
Western Sub-Saharan Africa	1990	Prevalence	171.6217	185.8433	158.9221	0.340553
Western Sub-Saharan Africa	1995	Prevalence	161.3871	173.8667	150.1998	0.369715
Western Sub-Saharan Africa	2000	Prevalence	153.3446	164.5603	142.9263	0.392736
Western Sub-Saharan Africa	2005	Prevalence	143.2897	153.9964	133.284	0.414057
Western Sub-Saharan Africa	2010	Prevalence	133.1871	143.2885	123.7327	0.436146
Western Sub-Saharan Africa	2015	Prevalence	134.311	147.7847	122.3665	0.476049

## Expected age-standardized rates per 100,000 population of tuberculosis incidence, prevalence, and mortality among HIV-negative individuals based on SDI

SDI	Expected mortality	Expected incidence	Expected prevalence
0.065	144.2257604	271.023483	234.8630379
0.075	140.4532044	265.8961366	229.8750418
0.085	136.7277294	260.8813831	225.0213752
0.095	133.0512455	255.9764701	220.2979705
0.105	129.4255423	251.1787184	215.7008934
0.115	125.8522875	246.4855195	211.2263379
0.125	122.3330264	241.894334	206.8706221
0.135	118.869182	237.4026895	202.6301841
0.145	115.4620549	233.0081787	198.5015777
0.155	112.1128247	228.7084576	194.4814684
0.165	108.822551	224.5012436	190.5666296
0.175	105.5921749	220.3843143	186.7539392
0.185	102.4225209	216.3555049	183.0403754
0.195	99.31429956	212.4127077	179.4230139
0.205	96.26810953	208.5538694	175.8990244
0.215	93.28444059	204.7769905	172.4656673
0.225	90.36367659	201.0801234	169.1202905
0.235	87.50609863	197.4613708	165.8603269
0.245	84.71188841	193.9188846	162.683291
0.255	81.98113179	190.4508646	159.5867764
0.265	79.31382235	187.0555569	156.5684532
0.275	76.70986519	183.7312526	153.6260652
0.285	74.1663304	180.4762871	150.7574278
0.295	71.67425853	177.289038	147.9604249
0.305	69.24626366	174.167925	145.2330075
0.315	66.88183123	171.1114076	142.5731907

SDI	Expected mortality	Expected incidence	Expected prevalence
0.325	64.58038274	168.117985	139.9790518
0.335	62.34127967	165.1861945	137.4487285
0.345	60.16382745	162.3146105	134.9804166
0.355	57.6560395	159.5018436	132.572368
0.365	54.8431225	156.7465397	130.2228889
0.375	52.1383914	154.0473787	127.9303384
0.385	49.54755266	151.4030739	125.6931259
0.395	47.0632039	148.8123711	123.5097105
0.405	44.6805903	146.2740473	121.3785982
0.415	42.39765806	143.7869105	119.2983415
0.425	39.92063468	140.9868516	116.8954674
0.435	37.53632495	136.4712806	112.732758
0.445	35.27944561	132.1111248	108.7283119
0.455	33.14287834	127.9007283	104.8758219
0.465	31.12056853	123.8346531	101.1692423
0.475	29.21059367	119.9076699	97.60277741
0.485	27.38610379	116.1147497	94.17087121
0.495	25.66509192	112.4510556	90.86819681
0.505	24.04385367	108.9119348	87.68964677
0.515	22.51750599	105.4929116	84.63032373
0.525	21.08151233	102.1896797	81.68553144
0.535	19.73141434	98.99809586	78.85076621
0.545	18.46239903	95.91417297	76.12170877
0.555	17.27019692	92.93407409	73.49421639
0.565	16.15069928	89.36159355	70.04503317
0.575	15.09995884	85.07750248	65.64516293
0.585	14.11418966	81.00363285	61.52587605
0.595	12.96391245	77.12945081	57.66902412
0.605	11.8322551	73.44496073	54.05764843
0.615	10.79071346	69.94067721	50.67590095

SDI	Expected mortality	Expected incidence	<b>Expected prevalence</b>
0.625	9.833554958	66.60759855	47.50897064
0.635	8.955165184	63.43718154	44.54301478
0.645	8.150094804	60.42131775	41.76509478
0.655	7.413095371	57.55231094	39.1631164
0.665	6.738230926	54.8228557	36.72577394
0.675	6.12169568	52.22601724	34.44249813
0.685	5.559086407	49.75521225	32.30340759
0.695	5.046127827	46.69690371	30.07735201
0.705	4.578807409	43.81503744	28.00604542
0.715	4.197174594	41.12526054	26.08653832
0.725	3.91033179	38.6141595	24.30723257
0.735	3.64480549	36.26929035	22.65744418
0.745	3.399132632	34.07910661	21.12732944
0.755	3.171732049	32.03289274	19.70781714
0.765	2.96095672	30.12070267	18.39054642
0.775	2.765511733	28.33330293	17.16780967
0.785	2.518639731	26.66212011	16.03250015
0.795	2.258446258	25.09919229	14.97806388
0.805	2.02734896	23.63712411	13.9984555
0.815	1.82214373	22.26904525	13.08809768
0.825	1.64000532	20.98857199	12.24184392
0.835	1.478323568	19.78977168	11.45494428
0.845	1.323291839	18.66712989	10.72301396
0.855	1.164631997	17.61551996	10.04200445
0.865	1.02537168	16.63017484	9.408176911
0.875	0.903148497	15.70666108	8.818077844
0.885	0.79588117	14.84085469	8.268516614
0.895	0.701753786	14.02891882	7.756544838
0.905	0.619145005	13.26728307	7.279437419
0.915	0.546628309	12.55262438	6.834675102

SDI	Expected mortality	Expected incidence	Expected prevalence
0.925	0.482950562	11.88184928	6.419928422
0.935	0.42701239	11.25207748	6.033042948
0.945	0.377850382	10.66062663	5.672025692
0.955	0.334621027	10.10499827	5.335032607
0.965	0.296586332	9.582864711	5.020357084
0.975	0.263100968	9.092056965	4.726419348